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United States Congressional Ser

108th Congress — 2d Session • January 20–December 7, 2004

House Document

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FINANCIAL DISCLOSURE REPORTS
MEMBERS OF HOUSE REPRESENTATIVES
JANUARY 1–DECEMBER 31, 2003
VOLUME 1

United States Congressional Serial Set

Serial Number 14896

United States Government Printing Office
Washington : 2005

108th Congress, 2d Session- - - - - - - - - - - - House Document 108–205

FINANCIAL DISCLOSURE
REPORTS
OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES

FOR THE PERIOD BETWEEN

January 1, 2003 and December 31, 2003

COMMUNICATION FROM THE CLERK OF THE HOUSE

TRANSMITTING

THE ANNUAL COMPILATION OF PERSONAL FINANCIAL DISCLOSURE STATEMENTS AND AMENDMENTS THERETO FILED WITH THE CLERK OF THE HOUSE OF REPRESENTATIVES, PURSUANT TO RULE XXVI, CLAUSE 1, OF THE HOUSE RULES

(Volume 1 of 3)

SEPTEMBER 7, 2004.—REFERRED TO THE COMMITTE ON STANDARDS OF OFFICIAL CONDUCT AND ORDERED TO BE PRINTED

U.S. GOVERNMENT PRINTING OFFICE

95–394 WASHINGTON : 2004

LETTER OF SUBMITTAL

OFFICE OF THE CLERK,
U.S. HOUSE OF REPRESENTATIVES,
Washington, DC, August 1, 2004.

Hon. J. DENNIS HASTERT,
The Speaker, The Capitol,
U.S. House of Representatives, Washington, DC.

DEAR MR. SPEAKER: I hereby submit the annual compilation of personal financial disclosure statements filed with the Clerk of the House of Representatives pursuant to the Ethics in Government Act of 1978, as amended, 5 U.S.C. app. § 101–111 (1994), and the House Rule XXVI.

This compilation contains the personal financial disclosure statements and amendments thereto required to be filed by Members of the House pursuant to the Act and House Rule XXVI by May 15, 2004. The compilation includes reported financial transactions which occurred between January 1, 2003 and December 31, 2003.

House Rule XXVI provides that the annual compilation of reports filed with the Clerk be printed as a House document by August 1 and contain all such reports filed by Members within the period beginning January 1 and ending June 15 of each year. This compilation is submitted accordingly.

With best wishes, I am

Sincerely,

JEFF TRANDAHL,
Clerk, House of Representatives.

Enclosures.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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NEIL ABERCROMBIE
(Full Name)
1502 LONGWORTH BUILDING
(Mailing Address)
WASHINGTON, DC 20515
Daytime Telephone: 225-2726

Filer Status	[X] Member of the U.S. House of Representatives — State: HI District: 01	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Neil Abercrombie	4.27.04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	STATE OF HAWAII	LEGISLATIVE PENSION	25,000
	RESEARCH CORPORATION OF THE UNIVERSITY OF HAWAII	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name NEIL ABERCROMBIE

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock					X								X																		P
	Simon & Schuster	Indefinite																		Royalties				X					X			
	1st Bank of Paducah, KY accounts						X									X										X						
	UNIV. of HI CREDIT UNION accts				X											X						X										
	CO-OP APT. MAKIKI ST.	O																		SALE								X				S

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name NEIL ABERCROMBIE | Page 3 of 4

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	CO-OP APT. - MAKIKI STREET		X		7-22-03			X							

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	COMMUNICATIONS WORKERS OF AMERICA	JUNE 7-8	WASH, DC-TUCSON, AZ-WASH. DC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

ANIBAL ACEVEDO-VILA
(Full Name)

F-13 5th STREET TERRANOVA GUAYNABO, PR 00969
(Mailing Address)

(202) 225-2516
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: PR District: 1	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 11, 2004

6

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Cosvi	$1,001 - $15,000	IRA	NA	
SP	Oriental Trust	$1,001 - $15,000	IRA	NA	
	Banco Popular	$1,001 - $15,000	IRA	NA	
SP	IBM	$15,001 - $50,000	Preferred Savings Acc/NA	NA	
	Thrifty Savings Plan	$1,001 - $15,000	Retirement Savings Plan	NA	
	Commonwealth of Puerto Rico Public Retirement Fund	$15,001 - $50,000	Retirement Fund	NA	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name ANIBAL ACEVEDO-VILA

	Jefferson Pilot	$1,001 - $15,000	Life Insurance	NA	
	Oriental Bank	$1,001 - $15,000	IRA	NA	

SCHEDULE V - LIABILITIES

Name ANIBAL ACEVEDO-VILA

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	VISA	Credit Card	$10,001 - $15,000
	American Express	Credit Card	$10,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name ANIBAL ACEVEDO-VILA

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Congressional Hispanic Caucus Institute Annual Retreat (CHCI)	Jan 22-25	Not paid by the sponsor	Y	Y	Y	N/A
Congressional Retreat (Public Governance Institute)	Feb 28-March 2	Washington, D.C. - West Virginia-Washington, DC	Y	Y	Y	N/A
Tri Caucus Retreat (Sony Music Enterteinment)	Oct 23-26	Not paid by the sponsor	Y	Y	Y	N/A

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

Gary L. Ackerman
(Full Name)

2243 Raybum Washington, DC 20515
(Mailing Address)

202-225-2601
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: NY District: 05 ☐ Officer Or Employee Employing Office:

Termination Date:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☑ No
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Gary L. Ackerman	5/17/03

SCHEDULE I - EARNED INCOME

Name Gary L. Ackerman

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Pride of Judea Mental Health Center/Jewish Board of Family and Children's Services	Spouse Compensation	N/A
Spouse Private Practice/Consulting	Spouse Compensation	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Gary L. Ackerman

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Tribco, LLC (newspaper company), Flushing, NY	$250,001 - $500,000	CAPITAL GAINS	$15,001 - $50,000	
	IRA--Nationwide	$50,001 - $100,000	N/A	NONE	
SP	IRA--Nationwide	$15,001 - $50,000	N/A	NONE	
	IRA--Family Management Corp.	$15,001 - $50,000	N/A	NONE	
	Melrose Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
	Citibank (various)	$1 - $1,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Gary L. Ackerman

Pershing/Alliance Cash/Money Market Government Account (separate accounts)	$1,001 - $15,000	INTEREST	$1 - $200	
Pershing/Alliance Cash/Money Market Government Account	$1 - $1,000	INTEREST	NONE	
Pershing/Alliance Cash/Money Market Government Account	$1,001 - $15,000	INTEREST	$1 - $200	
Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
Federal Home Loan Bank Corp. Bond Call (separate accounts)	$1,001 - $15,000	DIVIDENDS/INTEREST	NONE	P
Federal Home Loan Bank Corp. Bond Call	$15,001 - $50,000	DIVIDENDS/INTEREST	NONE	S
Federal Home Loan Bank Corp. Bond Call	$1,001 - $15,000	DIVIDENDS/INTEREST	NONE	S
Sonus Networks, Inc. Stock	$1 - $1,000	CAPITAL GAINS	NONE	
Calamos Market & Neutral Fund Class A	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	
Oppenheimer Main St. Income & Growth C (separate accounts)	$1,001 - $15,000	CAPITAL GAINS	NONE	S
Oppenheimer Main St. Income & Growth C	$1,001 - $15,000	CAPITAL GAINS	NONE	S
Oppenheimer Main St. Income & Growth C	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
Seligman Frontier Fund, Class D (separate accounts)	$1,001 - $15,000	CAPITAL GAINS	NONE	S
Seligman Frontier Fund, Class D	$1,001 - $15,000	CAPITAL GAINS	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Gary L. Ackerman

	Seligman Frontier Fund, Class D	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Pimco Real Return Fd Cl D	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	P
	Merger Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	P
	Xenonics Options	$250,001 - $500,000	CAPITAL GAINS	NONE	
	Fidelity Magellan	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Gary L. Ackerman

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Federal Home Loan Bank Corp. Bond Call	P	2/28/03	$1,001 - $15,000
	Federal Home Loan Bank Corp. Bond Call	S	4/14/03	$15,001 - $50,000
	Federal Home Loan Bank Corp. Bond Call	S	5/28/03	$1,001 - $15,000
	Pimco Real Return Fd Cl D	P	7/21/03	$15,001 - $50,000
	Oppenheimer Main St. Income & Growth C	S	4/21/03 (partial)	$1,001 - $15,000
	Oppenheimer Main St. Income & Growth C	S	4/21/03 (partial)	$1,001 - $15,000
	Seligman Frontier Fund, Class D	S	4/21/03 (partial)	$1,001 - $15,000
	Seligman Frontier Fund, Class D	S	4/21/03 (partial)	$1,001 - $15,000
	Merger Fund	P	7/21/03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Gary L. Ackerman

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
SP	Selig Zises	Personal note	$10,001 - $15,000
	Various credit cards: Visa, Mastercard, MBNA, Fleet	Moved for rate change	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Gary L. Ackerman

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Long Island Federation of Labor, AFL-CIO	9/21-9/22/03	New York--Saratoga Springs--New York	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Gary L. Ackerman

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors (unpaid)	Tribco LLC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(9) LEGISLATIVE RESOURCE CENTER
2004 MAY 17 AM 11:10
MC (Office Use Only) HOUSE OF REPRESENTATIVES

ROBERT BROWN ADERHOLT
(Full Name)

POST OFFICE BOX 323
HALEYVILLE, ALABAMA 35565-0323
(Mailing Address)

(202) 225-4876
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: ALABAMA District: 4TH	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert B. Aderholt	May 17, 2004

Name ROBERT BROWN ADERHOLT	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2 000
XYZ Magazine	Article	Aug. 13, 2003	$500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify; For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X																
	60 ACRES LAND-Hogglerige Haleyville, Alabama				X															Coal Royalties	X											
	COMMERCIAL BLDG - Hwy 5 S. Haleyville, Alabama							X							X												X					
	IRA-Traders & Farmers Bank			X												X					N/A											
	IRA-NY Life Securities, Inc					X								X							N/A											
	IRA-New York Life Insurance			X												X					N/A											
SP	Beaver Dam Farm, Inc.			X																Farm Income						X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT BROWN ADERHOLT

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	65 ACRES LAND - Greenbrier Farms					X													Farm Income	X											
SP	30 ACRES LAND -(1/16 Int)- Huntsville			X												X				X											
	Congressional Fed Cred Un	X													X					X											
SP	Congressional Fed Cred Un	X													X					X											
JT	Community Bank	X													X						X										
	Traders & Farmers Bank		X												X							X									
SP	Traders & Farmers Bank	X													X						X										
DC	Traders & Farmers Bank	X													X						X										
	Common Stock - GlaxoSmith Kline		X										X									X									
	Common Stock - Telefonos De Mexico	X											X								X										
	Common Stock - Prime Cash Series (Fannestock)			X									X							X											
	Common Stock - Alliance Cap.		X										X							X											
	Common Stock - H&Q Hlthcare	X														X						X									
	Common Stock - Ivax Corp.		X										X			X				X											
	Common Stock - VLSI Tech, Inc		X										X							X											
JT	Common Stock - Navistar Int.		X										X							X											
JT	Common Stock - Honeywell Int.				X								X										X								
	Common Stock - Ryan Beck/ Kelmoore	X											X			X					X										S
	Common Stock - Xoma, LTD	X											X			X								X							P,S
	Common Stock - Ivillage,Inc	X											X			X									X						P,S

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SCHEDULE IV — TRANSACTIONS

Name ROBERT BROWN ADERHOLT | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Xoma, LTD.				01-01-03	X									
	Xoma, LTD.		X		08-11-03		X								
	Ivillage, Inc.				08-13-03		X								
	Ivillage, Inc.		X		12-30-03		X								

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Name ROBERT BROWN ADERHOLT | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			[redacted]	C $15,001–$50,000	D [redacted]	E $100,001–$250,000	F [redacted]	G $500,001–$1,000,000	H [redacted]	I $5,000,001–$25,000,000	J [redacted]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Congressional Retreat 2003 - The Public Governance Institute	Feb 28 - Mar 2	Wash., D.C. - The Greenbriar - Wash., D.C.	Y	N	Y	N
Receive award at annual meeting - Electric Cities of Alabama	Jul 12 - 14	Wash., D.C. - Perdido Beach - Birmingham, AL	Y	Y	Y	N
Attend announcement of plant expansion - Toyota	Jul 14	Birmingham, AL - Wash., D.C	N	N	N	N
Speaker at annual meeting - Business Council of Alabama	Aug 17 - 20	Haleyville, AL - Sandestin, FL - Haleyville, AL	Y	Y	Y	N
Tour Toyota factory conversion facility - JM Family Enterprises	Aug 24 - 26	Huntsville, AL - Jacksonville FL - Point Clear, AL	Y	Y	Y	N
Keynote speaker at annual meeting - Tennessee Tombigbee Waterway Dev.	Aug 26 - 29	Point Clear, FL - Haleyville, AL	Y	Y	Y	N
To build friendship between U.S., Israel, and Jordan - The International Foundation	Dec 9 - 14	Wash., D.C. - Tel Aviv, Israel - Amman, Jordan - Atlanta, GA	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A		

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(4)

2004 MAY -5 PM 1:37

U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

W. TODD AKIN
(Full Name)

305 CONWAY HILL RD.
(Mailing Address)

ST. LOUIS, MO. 63141

Daytime Telephone: 314 434 7948

Filer Status: [X] Member of the U.S. House of Representatives — State: ___ District: ___ [ ] Officer or Employee — Employing Office: ___

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date: ___

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	W. Todd Akin	MAY , 04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

	A	B	C	D	E	F	G	H	I	J	K	L
	None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000
SP, DC, JT — Examples: SP Mega Corp Stock					X							
SP, DC, JT — Examples: Simon & Schuster			Indefinite									
SP, DC, JT — Examples: 1st Bank of Paducah, KY accounts						X						
JT MERRIL LYNCH RETIREMENT ANNUITY - QUALITY EQUITY				X								
IRA - AIM WEINGARTEN			X									
SP IRA - AIM WEINGARTEN			X									
JT CATERPILLAR			X									
JT CHEVRON TEXICO			X									
JT DUPONT EI NEMOURS			X									

BLOCK C — Type of Income

	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)
SP, DC, JT — Examples: SP Mega Corp Stock	X						
SP, DC, JT — Examples: Simon & Schuster							Royalties
SP, DC, JT — Examples: 1st Bank of Paducah, KY accounts			X				
JT MERRIL LYNCH RETIREMENT ANNUITY - QUALITY EQUITY							ANNUITY
IRA - AIM WEINGARTEN							
SP IRA - AIM WEINGARTEN							
JT CATERPILLAR	X			X			
JT CHEVRON TEXICO	X						
JT DUPONT EI NEMOURS	X						

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000
SP, DC, JT — Examples: SP Mega Corp Stock				X							
SP, DC, JT — Examples: Simon & Schuster									X		
SP, DC, JT — Examples: 1st Bank of Paducah, KY accounts						X					
JT MERRIL LYNCH RETIREMENT ANNUITY - QUALITY EQUITY	X										
IRA - AIM WEINGARTEN	X										
SP IRA - AIM WEINGARTEN	X										
JT CATERPILLAR					X						
JT CHEVRON TEXICO			X								
JT DUPONT EI NEMOURS			X								

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	P, S, E
SP, DC, JT — Examples: SP Mega Corp Stock	P
SP, DC, JT — Examples: Simon & Schuster	
SP, DC, JT — Examples: 1st Bank of Paducah, KY accounts	
JT MERRIL LYNCH RETIREMENT ANNUITY - QUALITY EQUITY	
IRA - AIM WEINGARTEN	
SP IRA - AIM WEINGARTEN	
JT CATERPILLAR	S
JT CHEVRON TEXICO	P
JT DUPONT EI NEMOURS	P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: W. TODD AKIN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: None	A	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	$100,001 – $250,000	G $250,001 – $500,000	$500,001 – $1,000,000	I $1,000,001 – $5,000,000	$5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	$1 – $200	III $201 – $1,000	$1,001 – $2,500	V $2,501 – $5,000	$5,001 – $15,000	VII $15,001 – $50,000	$50,001 – $100,000	IX $100,001 – $1,000,000	$1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
JT	EASTMAN KODAK			X										X									X										
JT	GENERAL ELECTRIC			X										X									X										P
JT	GENERAL MOTORS				X									X									X										P
JT	GOODYEAR TIRE + RUBBER			X										X							X												
JT	HEWLETT PACKARD			X										X			X								X								S
JT	INTERNATIONAL PAPER			X										X									X										P
JT	JP MORGAN			X										X									X										P
JT	SBC COMMUNICATIONS			X										X									X										P
JT	HONEYWELL			X										X									X										P
SP	ROTH IRA - SCUDDER			X										X									X										
	ROTH IRA - SCUDDER			X										X									X										
DC	ATT WIRELESS			X										X							X												
DC	ALTRIA			X										X									X										
DC	DUPONTE			X										X								X											
DC	GOODYEAR TIRE			X										X							X												
DC	HONEYWELL			X										X								X											
DC	JP MORGAN			X										X								X											
DC	KODAK			X										X								X											

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SCHEDULE IV — TRANSACTIONS

Name W. TODD AKIN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	CATERPILLAR		X		7/28/03	X									
JT	HEWLETT PACKARD		X		7/28/03	X									
JT	HONEYWELL	X			7/28/03	X									
JT	CHEVRON	X			7/28/03	X									
JT	DU PONTE	X			7/28/03	X									
JT	GENERAL ELECTRIC	X			7/28/03	X									
JT	GENERAL MOTORS	X			7/28/03	X									
JT	HEWLETT PACKARD	X			7/28/03	X									
JT	INT. PAPER	X			7/28/03	X									
JT	JP MORGAN	X			7/28/03	X									
JT	SBC COMMUNICATIONS	X			7/28/03	X									

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
[illegible] RESOURCE CENTER
2004 MAY 17 PM 3:47
MC
(Office Use Only)

RODNEY MC KINNIE ALEXANDER
(Full Name)
P.O. BOX 368, 319 NANCY'S RD.
(Mailing Address)
QUITMAN, LA. 71268
318-259-6871
Daytime Telephone

Filer Status [X] Member of the U.S. House of Representatives — State: LA District: 05 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rodney Alexander	5-17-04

Name RODNEY M. ALEXANDER | Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	LOUISIANA TECH UNIVERSITY	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name RODNEY M. ALEXANDER | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	Examples: SP Mega Corp. Stock; Simon & Schuster; 1st Bank of Paducah, KY accounts	Indefinite	DIVIDENDS: X; INTEREST: X	Other Type of Income: Royalties; Amount: $2,501 - $5,000	P, S, E: P
SP	Residential Property				
JT	ANADARKO	INDEFINITE	Royalties	$2,501 - $5,000	

For additional assets and unearned income, use next page.

Name RODNEY M. ALEXANDER Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			A $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	FIRST NATIONAL BANK, BENTON, LA.	MORTGAGE ON 723 PIERREMONT, SHREVEPORT			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	AMERICAN ISRAELI PAC	Aug 2-7	Monro - Atlanta - NY - Israel	Y	Y	Y	N

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LEGISLATIVE RESOURCE CENTER
2004 JUN -2 AM 10: 40
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC

P.O. Box 368
Quitman, La. 71268
May 21, 2004

Jeff Trandahl, Clerk of the House
c/o Legislative Resource Center
B106 Cannon HOB
U.S. House of Representatives
Washington, DC 20515

Dear Sir:

This information is to be appended to my annual financial disclosure statement for 2003 in order to provide additional information for your review.

The physical address of the rental property is 732 Pierrement Avenue, Shreveport, LA 71106.

The royalties received in 2003 from Anadarko are from the mineral lease on my home property. I will receive royalties, beginning in 2004, for the harvesting of gas, but I have no estimate of the value for this resource, nor do I have any knowledge of the length of time that these payments will continue.

Please notify me if you require additional information.

Sincerely,

Rodney Alexander

Rodney Alexander
Member of Congress
LA 05

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 3:33
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

THOMAS H. ALLEN
(Full Name)

17 FAIRMOUNT ST.
(Mailing Address)

PORTLAND ME 04103

Daytime Telephone: 202-225-6116

Filer Status: [X] Member of the U.S. House of Representatives — State: ME District: 1 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas H. Allen	May 17, 2004

05/17/04 12:54 FAX 2078710720 TOM ALLEN CONGRESSMAN 003

Name THOMAS H. ALLEN Page 2 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None; C $1,001 – $15,000; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000	DIVIDENDS; INTEREST; EXCEPTED TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; III $201 – $1,000; V $2,501 – $5,000; VII $15,001 – $50,000; IX $100,001 – $1,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT — Examples: SP	Mega Corp. Stock	X	X		P
	Simon & Schuster	Indefinite	Royalties	X	
	1st Bank of Paducah, KY accounts		X		
JT	UBS (PAINE WEBBER) FIN'L SERVICES ACCT		X X	X	
	AMERICAN FUNDS CAPITAL WORLD GR + INC CL A	X	X		
	AMERICAN FUNDS - AMER. BAL'D CL A	X	X		
	AMERICAN FUNDS - AMER MUTUAL CL A	X	X		
	US TREASURY BILL DUE 3/4/04		X		

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name THOMAS H. ALLEN

Page 3 of 6

BLOCK A Asset and/or Income Source	SP, DC, JT	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
245 COMMERCIAL ST PORTLAND ME (5.897% INTEREST IN REAL ESTATE)											PARTNERSHIP	X						
UBS INHERITED IRA				X					X				X					
US TREAS NOTE 5.8750% 2/15/04			X						X				X					
US TREAS NOTE 5.75% 11/15/05			X						X				X					
US TREAS NOTE 5.625% 2/15/06			X						X				X					
DRUMMOND WOODSUM PSP W/ UMB BANK OF KANSAS CITY MO					X				N/A				N/A					
ICMA RETIRE. CORP			X						N/A				N/A					

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03/11/04 12:55 FAX 2078710720 TOM ALLEN CONGRESSMAN 004

SCHEDULE IV — TRANSACTIONS

Name THOMAS H. ALLEN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	Example: Mega Corporation Common Stock		10-12-03	X				
	AMERICAN FUNDS CAPITAL WORLD GROWTH + INCOME FUND CL A		9/8/03	X				
	AMERICAN FUNDS AMERICAN BALANCED FUND CL A		9/8/03	X				
	AMERICAN FUNDS AMERICAN MUTUAL FUND CL A		9/8/03	X				
	US TREASURY BILL DUE 12/4/03		9/8/03	X				
	US TREASURY BILL DUE 12/4/03	X	12/4/03	X				
	US TREASURY BILL DUE 3/4/04		9/8/03	X				

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03/17/04 12:58 FAX 2078710720 TOM ALLEN CONGRESSMAN 006

Name THOMAS H. ALLEN Page 5 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: $15,001–$50,000	$100,001–$250,000	$500,001–$1,000,000	$5,000,001–$25,000,000	Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	BANGOR SAVINGS BANK, ME	MORTGAGE ON 245 COMMERCIAL ST PORTLAND ME		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 8–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	ASPEN INSTITUTE	JAN 17-22, 2003	MIAMI - HAWAII - PORTLAND ME	Y	Y	Y	N
	JFK SCHOOL/COMMONWEALTH FUND	3/16-17/03	PORTLAND ME - FORT LAUDERDALE, FL	Y	Y	N	N
	ASPEN INSTITUTE	6/27-7/3/03	WASH DC - HELSINKI - WASH DC	Y	Y	Y	N
	AMER. SHIPBLDG ASS'N	12/1-3/03	PORTLAND ME - FT MYERS FL	Y	Y	N	N
	ASPEN INSTITUTE	12/4-7/03	HOUSTON TX - PUNTA MITA, MEXICO - WASH DC	Y	Y	Y	N

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03/11/04 12:56 FAX 2078710720 TOM ALLEN CONGRESSMAN 007

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(6) **HAND DELIVERED**

LEGISLATIVE RESOURCE CENTER
2004 MAY 18 PM 1:51
(Office Use Only)

MC

THOMAS H. ALLEN
(Full Name)

17 FAIRMOUNT ST.
(Mailing Address)

PORTLAND ME 04103

Daytime Telephone 202-225-6116

Filer Status [X] Member of the U.S. House of Representatives — State: ME District: 1 [ ] Officer or Employee — Employing Office:

Report Type [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas H. Allen	May 17, 2004

Name THOMAS H ALLEN | Page 2 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X						Royalties												P
	Examples: Simon & Schuster		Indefinite																										X			
	Examples: 1st Bank of Paducah, KY accounts						X									X																
JT	UBS (PAINE WEBBER) FIN'L SERVICES ACCT				X									X		X							X									
	AMERICAN FUNDS CAPITAL WORLD GR-INC CL A				X									X		X						X										
	AMERICAN FUNDS - AMER. BAL'D CL A				X									X		X						X										
	AMERICAN FUNDS - AMER MUTUAL CL A				X									X		X						X										
	US TREASURY BILL DUE 3/4/04				X											X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name THOMAS H. ALLEN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	245 COMMERCIAL ST PORTLAND ME (5.897% INTEREST IN REAL ESTATE)						X													PARTNERSHIP	X											
	UBS INHERITED IRA					X										X							X									
	US TREAS NOTE 5.8750% 2/15/04			X												X							X									
	US TREAS NOTE 5.75% 11/15/05			X												X							X									
	US TREAS NOTE 5.625% 2/15/06			X												X							X									
	DRUMMOND WOODSUM PSP w/ UMB BANK OF KANSAS CITY, MO							X								N/A								N/A								
	ICMA RETIRE. CORP.			X												N/A								N/A								

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SCHEDULE IV — TRANSACTIONS

Name THOMAS H. ALLEN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	AMERICAN FUNDS CAPITAL WORLD GROWTH + INCOME FUND CL A	X			9/8/03		X								
	AMERICAN FUNDS AMERICAN BALANCED FUND CL A	X			9/8/03		X								
	AMERICAN FUNDS AMERICAN MUTUAL FUND CL A	X			9/8/03		X								
	US TREASURY BILL DUE 12/4/03	X			9/8/03		X								
	US TREASURY BILL DUE 12/4/03		X		12/4/03		X								
	US TREASURY BILL DUE 3/4/04	X			9/8/03		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	BANGOR SAVINGS BANK, ME	MORTGAGE ON 245 COMMERCIAL ST PORTLAND ME				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	ASPEN INSTITUTE	JAN 17-22, 2003	MIAMI - HAWAII — PORTLAND ME	Y	Y	Y	N
	JFK SCHOOL/COMMONWEALTH FUND	1/16-17/03	PORTLAND ME — FORT LAUDERDALE, FL	Y	Y	N	N
	ASPEN INSTITUTE	6/27-7/3/03	WASH DC — HELSINKI — WASH DC	Y	Y	Y	N
	AMER. SHIPBLDG ASSN	12/1-3/03	PORTLAND ME — FT MYERS FL	Y	Y	N	N
	ASPEN INSTITUTE	12/4-7/03	HOUSTON TX — PUNTA MITA, MEXICO — WASH DC	Y	Y	Y	N

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2004 MAY 14 PM 2:15

MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees.

Robert E. Andrews
(Full Name)

215 Fourth Avenue Haddon Heights, NJ 08035
(Mailing Address)

856-546-5100
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: NJ District: 01	☐ Officer Or Employee — Employing Office:	**A $200 penalty shall be assessed against anyone who files more than 30 days late.**
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☑ No ☐
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4. § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert E. A	5/13/04

SCHEDULE I - EARNED INCOME

Name Robert E. Andrews

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Rutgers Law School	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert E. Andrews

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Olive B. Andrews Testamentary Trust (50%) remainder interest in Life Estate. Note: This trust was not created by the reporting individual and the reporting individual has no specific knowledge of the holdings of the holdings of the trust	$15,001 - $50,000	EXCEPTED TRUST	NONE	
JT	Citizens Bank Checking Account	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	PNC National Bank Checking	$50,001 - $100,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert E. Andrews

SP	Stock - Verizon	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Stock - PEPCO	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Dean Witter Money Market Fund	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	Morgan Stanley Dean Witter Money Market Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Robert E. Andrews

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Pacyprians of Metropolitan Washington	Jan.25	Maryland	Y	Y	Y	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(3)

HAND DELIVERED

2004 MAY 14 PM 3:22

(Office Use Only)

JOE BACA
(Full Name)

1850 N. MAGNOLIA
RIALTO, CA 92376
(Mailing Address)

DC tel 202-225-6161 SBwk: 909-885-2222
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 43RD	[ ] Officer or Employee — Employing Office:	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joe Baca	5-13-04

Name	JOE BACA	Page 2 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	RIALTO UNIFIED SCHOOL DISTRICT	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JOE BAGA

Page 3 of 3

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B											Block C						Block D											Block E
			A None	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp Stock				X							X																	P
			Simon & Schuster		Indefinite											X				Royalties								X			
			1st Bank of Paducah, KY accounts				X																								
	GTE VERIZON				X									X									X								
	TERS / Retirement System			X																Pension				N/A							
	STRS / State Ret. Teachers				X															Pension				N/A							
	American Nat'l Ins. Co.				X															IRA				N/A							

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2004 MAY 18 PM 12:37

(Office Use Only)

MC

Spencer T. Bachus, III

(Full Name)

442 Cannon Building, Washington, DC 20515

(Mailing Address)

202-225-4921

Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: Alabama District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 17, 2004

Name	Spencer T. Bachus, III	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 2003 Aug. 13, 2003	$2,000 $500
Council of Insurance Agents & Brokers, Washington, DC to Civitan Home, Clanton, AL	Speech	Feb 3, 2003	$500.00
Council of Insurance Agents & Brokers, Washington, DC to ARC of St Clair County, Pell City, AL	Speech	Feb 3, 2003	$500.00
Council of Insurance Agents & Brokers to Mental Retardation Disability Impv, Pell City, AL	Speech	Feb 3, 2003	$500.00
Council of Insurance Agents & Brokers to Kid One Transport, Birmingham, AL	Speech	Feb 3, 2003	$500.00
American Bankers Association to Friends of Bryce, Tuscaloosa, AL	Speech	Feb 22, 2003	$500.00
American Bankers Association to Genesis, Inc., Centreville, AL	Speech	Feb 22, 2003	$500.00

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Spencer T. Bachus, III | Page 1 of 3

BLOCK A — Asset and/or Income Source

[illegible] each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and any other asset or source of income which generated more than $200 in [illegible] during the year. For rental property, or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA, i.e., one where you have the power to select the specific investments, [illegible] information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude [illegible] unless [illegible] owed to you [illegible] by you or your spouse [illegible] any deposits totaling [illegible] savings accounts, [illegible] income derived from [illegible] accounts.

[illegible] Only indicate that an asset is that of your spouse or dependent child (DC) or is jointly held [illegible] as follows: SP, DC, Joint, as the [illegible] left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example Partnership Income, Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction
[illegible]	[illegible]					X								X																			
[illegible]	[illegible]																			Royalties													
[illegible]	[illegible]						X									X																	
SP	AmSouth Bank			X												X						X											
	Congressional Fed Cr Union		X													X						X											
	Fidelity Investments		X													X						X											
SP	BankAm Corp. Sub Notes				X											X								X									
SP	Agrium Inc. Pfd.					X										X										X							
SP	General Motors Notes				X											X								X									

For additional assets and unearned income, use next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Spencer T. Bachus, III

SP	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P S E)
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
SP	Citibank Nevada	C	INTEREST	III	
SP	Citibank FSB	C	INTEREST	III	
SP	Citibank INA	C	INTEREST	III	
SP	Solomon Inc. Mid-Term	E	INTEREST	V	
SP	Colonial Ppty Trust	D	DIVIDENDS	III	
SP	Smith Barney Mid Govt	D	DIVIDENDS	III	
SP	Smith Barney Hi Inc. Fnd	E	DIVIDENDS	V	
SP	Smith Barney Divstr Inc	F	DIVIDENDS	VI	
SP	Smith Barney IRA	F	DIVIDENDS; CAPITAL GAINS	V	
SP	Southwood Properties	F	RENT	IV	
	Put Nasdaq 100 Jul 32	A	CAPITAL GAINS	IV	P,S
	Put Nasdaq 100 Oct 35	A	CAPITAL GAINS	IV	P,S
	Put Nasdaq 100 Nov 35	A	CAPITAL GAINS	V	P,S
	Put Nasdaq 100 Jan 35	A	CAPITAL GAINS	II	P,S
	Put Nasdaq 100 Jan 36	A	CAPITAL GAINS	V	P,S
	Call S&P 500 Index Nov	A	CAPITAL GAINS	IV	P,S
	Call UnPacific Corp Dec 65	A	CAPITAL GAINS	VII	P,S
	Put Amazon.Com Jan 47	A	CAPITAL GAINS	III	P,S
	Put Nasdaq 100 Sept 33	A	CAPITAL GAINS	V	P,S
	Put Nasdaq 100 Oct 34	A	CAPITAL GAINS	VII	P,S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Spencer T. Bachus, III

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction (P, S, E)
	Call Nasdaq 100 Jul 30	X															X							X								P,S
	Call S&P 500 Index Nov	X															X								X							P,S
SP	Smith Barney Managed,Fd	X															X					X										S
	4821 12th Ave N, Bham,AL					X									X										X							
	2025 16th Ave N, Bham,AL					X									X										X							
	3939 28th Pl N, Bham, AL					X									X										X							
	2351 Rocky Ridge Rd, Bham						X								X												X					

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SCHEDULE IV — TRANSACTIONS

Name Spencer T. Bachus, III

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP	Asset		Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO DAY YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock		X		—	10 12-03		X								
SP	Bank America			X	—	03/01/03		X								
SP	General Motors			X		06/15/03		X								
SP	Salomon, Inc.			X		05/27/03			X							
SP	Smith Barney Managed Fd			X		07/31/03		X								
SP	Smith Barney Managed Fd			X		07/31/03		X								
SP	Teytron Capital			X		07/17/03		X								
	Put Nasdaq 100	Aug 28	X	X		07/23/03 08/18/03	X									
	Put Nasdaq 100	Aug 29	X	X		07/29/03 08/18/03	X									
	Put Nasdaq 100	Aug 31	X	X		08/12/03 08/18/03	X									
	Put Nasdaq 100	Sep 33	X	X		08/27/03 09/22/03	X									
	Put Nasdaq 100	Sep 34	X	X		09/18/03 09/22/03	X									
	Put Nasdaq 100	Oct 33	X	X		09/29/03 10/20/03		X								
	Put Nasdaq 100	Oct 33	X	X		10/01/03 10/20/03	X									
	Put Nasdaq 100	Oct 34	X	X		09/22/03 10/20/03		X								
	Put Nasdaq 100	Jul 32	X	X		07/09/03 07/19/03	X									
	Put Nasdaq 100	Sept 32	X	X		07/31/03 08/26/03	X									

This page may be copied if more space is required

SCHEDULE IV — TRANSACTIONS

Name: Spencer T. Bachus, III

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP / SF	Asset		Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SF	*Example* Mega Corporation Common Stock		X			10/12/03		X								
	Put Nasdaq 100	Oct 35	X	X		10/16/03 10/17/03	X									
	Put Nasdaq 100	Nov 35	X	X		11/07/03 11/17/03	X									
	Put Nasdaq 100	Jan 35	X	X		12/11/03 12/12/03	X									
	Put Nasdaq 100	Jan 36	X	X		12/15/03 12/16/03	X									
	Call S&P 500 Index	Nov	X	X		11/18/03 11/20/03	X									
	Call Union Pacific Corp.	Dec 65	X	X		11/25/03 12/10/03		X								
	Put Nasdaq 100	May 28	X	X		05/06/03 05/19/03	X									
	Put Nasdaq 100	Jun 28	X	X		05/15/03 06/23/03	X									
	Put Amazon.Com	Jan 47	X	X		12/11/03 12/12/03	X									
	Put Nasdaq 100	May 29	X	X		05/15/03 05/16/03	X									
	Put Nasdaq 100	Sep 33	X	X		08/22/03 08/26/03	X									
	Put Nasdaq 100	Oct 34	X	X		09/22/03 09/26/03		X								
	Put Nasdaq 100	Nov 34	X	X		10/28/03 11/17/03	X									
	Call Nasdaq 100	Jul 30	X	X		06/30/03 07/02/03	X									
	Call S&P 500 Index	Nov	X	X		11/18/03 11/20/03	X									

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SCHEDULE V — LIABILITIES

Name: Spencer T. Bachus, III

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Compass Bank, Birmingham, AL	Mortgage on Rental Houses Birmingham, AL			X							
	Compass Bank, Birmingham, AL	Mortgage, 2351 Rocky Rdge Rd Birmingham, AL				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	N/A						

This page may be copied if more space is required.

Name	Spencer T. Bachus, II	Page 1 of 1

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 1:23
(Office Use Only)

MC

(b)

Brian Norton Baird
(Full Name)

1421 Longworth House Office Building Washington, DC 20515
(Mailing Address)

202-225-3536
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representative — State: WA, District: 3	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		05/14/04

SCHEDULE I - EARNED INCOME

Name Brian Norton Baird

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
National Institutes of Health	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Brian Norton Baird

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Hartford-HAFCX	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Davis-NRVCX	$1,001 - $15,000		NONE	
	AIMFDS-Group FD,CL,L	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Wachovia Securities Money Mkt. CLA (new name after merger. Formerly called First Union Money Market)	$1,001 - $15,000	INTEREST	$1 - $200	
SP	TIAA-CREF	$50,001 - $100,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Brian Norton Baird

JT	Apt., 508 Seward Sq., SE Washington, DC 20003	$100,001 - $250,000	RENT	$5,001 - $15,000
SP	Wells Fargo Self-directed IRA	None		NONE
SP	Hewlett Packard Stock (part of Wells Fargo self-directed IRA)	$1,001 - $15,000		NONE
SP	Starbucks stock (part of WellsFargo self-directed IRA)	$15,001 - $50,000		NONE
SP	Intel stock (part of WellsFargo self-directed IRA)	$15,001 - $50,000		NONE
SP	E-Trade stock (part of Wells Fargo self-directed IRA)	$1,001 - $15,000		NONE
SP	Microsoft stock (part of WellsFargo self-directed IRA)	$100,001 - $250,000		NONE
SP	Microsoft stock	$100,001 - $250,000		NONE
SP	Salmon Beach 82 (house) Tacoma, WA	$100,001 - $250,000	RENT	$15,001 - $50,000
	Congressional Credit Union Checking Acct.	$1,001 - $15,000		NONE
	Congressional Credit Union Money Market Account	$15,001 - $50,000	DIVIDENDS	$1 - $200
	First Independent Bank checking account	$1,001 - $15,000	INTEREST	$1 - $200
	TIAA-CREF	$100,001 - $250,000		NONE
	Prentice Hall (Pearson)	Indefinite	Other: (book royalties)	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Brian Norton Baird

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Capitol Title	Mortgage on 508 Seward Square, SE Washington, DC	$500,001 - $1,000,000
JT	Walter Trzaskoma	Mortgage on 508 Seward Square, SE Washington, DC	$100,001 - $250,000
SP	Contract Service Corp.	Mortgage on Salmon Beach #82	$50,001 - $100,000

SCHEDULE VII: TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Brian Norton Baird

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Public Governance Institute	Feb. 28-March 2	Washington, DC-W. VA-Wash., DC	Y	Y	Y	N/A
Faith & Politics Inst.	March 7-9, 2003	Wash, DC-Alabama-Wash., DC	Y	Y	Y	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RECORDS CENTER
2004 MAY 13 AM 10: 17
(5)
U.S. HOUSE OF REPRESENTATIVES

MC

Richard H. Baker
(Full Name)

341 Cannon House Office Bldg.
(Mailing Address)

Washington, DC 20515

Daytime Telephone:

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State: Louisiana District: 06th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dick Baker	5·13·04

Name Richard H. Baker	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	K's Louisiana Market	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Richard H. Baker

Page 3 of 5

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the Instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* Mega Corp Stock	SP					X								X										X									P
	Examples: Simon & Schuster			Indefinite																	Royalties										X			
	Examples: 1st Bank of Paducah, KY accounts							X									X									X								
	Glacier Technology		X																			X												
SP	K's Louisiana Market																					X												
	Scenic Investments					X																X												

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001 – $50,000	E $100,001 – $250,000	G $500,001 – $1,000,000	I $5,000,001 – $25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Hancock Bank, Baton Rouge, Louisiana	Commerical Loan	X				
	MBNA	Business Loan					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities: positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Scenic Investments (uncompensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

RICHARD HUGH BAKER
6TH DISTRICT, LOUISIANA

COMMITTEE ON
FINANCIAL SERVICES

CHAIRMAN
SUBCOMMITTEE ON
CAPITAL MARKETS, INSURANCE AND
GOVERNMENT SPONSORED ENTERPRISES

SUBCOMMITTEE ON
FINANCIAL INSTITUTIONS
AND CONSUMER CREDIT

SUBCOMMITTEE ON
HOUSING AND
COMMUNITY OPPORTUNITY

Congress of the United States
House of Representatives
Washington, D.C. 20515–1806

COMMITTEE ON
TRANSPORTATION AND INFRASTURCTURE

SUBCOMMITTEE ON HIGHWAYS
TRANSIT AND PIPELINES

SUBCOMMITTEE ON AVIATION

SUBCOMMITTEE ON
WATER RESOURCES AND ENVIRONMENT

COMMITTEE ON
VETERANS' AFFAIRS

SUBCOMMITTEE ON HEALTH

May 19, 2004

HAND DELIVERED

2004 MAY 19 PM 12: 39

MC

Mr. Jeff Trandahl
Clerk, U. S. House Of Representatives
H1-54 Capitol
Washington, DC 20515

Dear Mr. Trandahl:

This is an amendment to my 2003 Financial Disclosure with the description of item 3 on Schedule III (Scenic Investments). This is a real estate investment located in East Baton Rouge Parish, Louisiana which is 200 acres of undeveloped land.

Should you need any additional information regarding this disclosure, please do not hesitate to contact me.

Sincerely,

Richard H. Baker
Member of Congress

RHB\lak

341 CANNON HOUSE OFFICE BUILDING
WASHINGTON, D.C. 20515-1806
(202) 225-3901
(202) 225-7313 (FAX)

5555 HILTON AVENUE
SUITE 100
BATON ROUGE, LA 70808
(225) 929-7711
(225) 929-7648 (FAX)
1-800-892-1253 (LA ONLY)

WWW.BAKER.HOUSE.GOV

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

2004 MAY 19 PM 12:39

U.S. HOUSE OF REPRESENTATIVES

Richard H. Baker
(Full Name)

341 Cannon House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-3901

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: Louisiana District: 06th	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED

***A $200 penalty* shall be assessed against anyone who files more than 30 days late.**

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	RHBaker	5/18/4

Name Richard H. Baker

Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B											Block C						Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X							P
	Simon & Schuster		Indefinite																	Royalties									X		
	1st Bank of Paducah, KY accounts						X									X										X					
	Glacier Technology	X																			X										
SP	K's Louisiana Market					X															X										
	Scenic Investments				X																X										

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Tammy Suzanne Green Baldwin
(Full Name)
10 East Doty Street, Suite 405
(Mailing Address)
Madison, WI 53703
Daytime Telephone: 202 225-2906

2004 MAY 17 PM 2:51

(Office Use Only)

9

MC

Filer Status	☒ Member of the U.S. House of Representatives	State: WI District: 02	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☒	No ☐
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☐

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tammy Baldwin	May 15, 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Tammy Baldwin

Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Examples:			A None	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,001 - $5,000,000	I $5,000,001 - $25,000,000	J $25,000,001 - $50,000,000	K $50,000,001 - $100,000,000	L Over $100,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP,		SP	Mega Corp. Stock					X								X																	P
DC,			Simon & Schuster		Indefinite																	Royalties									X		
JT			1st Bank of Paducah, KY accounts						X									X															
D. Green Irrevocable Trust for Tammy Baldwin:																																	
1) First American Equity Income CI Y FAGIX						X										X										X							
2) First American Mid Cap Growth Opp Fd CI Y FISGX							X												X														
3) First American Large Cap Growth Opp CI Y FIGWX							X									X																	
4) First American Intermediate Govt Bd CI Y FYGYX								X								X			X														
5) First Amer Prime Oblig Fund CI Y						X												X															

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tammy Baldwin

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	WI Retirement System																				N/A											
	Qualified Blind Trust							X											X						X							
JT	Rental Property: [illegible]								X						X											X						
JT	Rental Property: [illegible]							X							X											X						
JT	Vanguard Money Market Act.				X									X								X										
JT	Home Savings Checking Acct.			X												X						X										

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SCHEDULE IV — TRANSACTIONS

Name Tammy Baldwin

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	B $15,001–$50,000	C $50,001–$100,000	D $100,001–$250,000	E $250,001–$500,000	F $500,001–$1,000,000	G $1,000,001–$5,000,000	H $5,000,001–$25,000,000	I $25,000,001–$50,000,000	J Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
	D. Green Irrevocable Trust for Tammy Baldwin First Amer Inter Govt Bd CI Y	X			11-24-03	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	GMAC Mortgage Corporation of Appleton, Wisconsin	mortgage on 809 Spaight St Madison, WI Rental Property			X		
JT	GMAC Mortgage Corporation of Appleton, Wisconsin	2nd mortgage on 809 Spaight St Madison, WI Rental Property	X				
JT	Principal Residential Mortgage of Des Moines, Iowa	mortgage on 350 9th St, SE Washington DC Rental Property		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Commonwealth Fund/Kennedy School of Government	Jan 16-20	Madison, WI - Ft Lauderdale, FL - Madison, WI	Y	Y	Y	N
	Public Governance Institute	Feb 28-Mar 2	Wash., DC - White Sulphur Springs, WV - Washington DC	Y	Y	Y	N
	American - Israel Education Foundation	Aug 2-10	Middleton, WI - Israel - Madison, WI	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 01-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 27 PM 4:36
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Tammy Suzanne Green Baldwin
(Full Name)
10 East Doty Street Suite 405
(Mailing Address)
Madison, WI 53703
Daytime Telephone 202 225-2906

Filer Status	☒ Member of the U.S. House of Representatives — State: WI District: 02	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15) ☒ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☒	No ☐
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tammy Baldwin	May 26, 2004

Name Tammy Baldwin | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
None			

For payments to charity in lieu of honoraria, use Schedule II.

Name Tammy Baldwin | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the Instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	Block C: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock			X				X										P
	Simon & Schuster		Indefinite								Royalties					X		
	1st Bank of Paducah, KY accounts								X									
	D. Green Irrevocable Trust for Tammy Baldwin:												X					
	1) First American Equity Income CI Y FAQIX		X					X										
	2) First American Mid Cap Growth Opp Fd CI Y FISGX																	
	3) First American Large Cap Growth Opp CI Y FIGWX							X										
	4) First American Intermediate Govt. Bd CI Y FYGYX			X				X										
	5) First Amer Prime Oblig Fund CI Y		X						X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tammy Baldwin

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	O	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	WI Retirement System												N/						
	Qualified Blind Trust				X										X				
JT	Rental Property: Madison, WI $50,000															X			
JT	Rental Property: Washington, DC $50,000				X														
JT	Vanguard Money Market Acct.								X										
JT	Home Savings Checking Acct.		X							X									

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Name Tammy Baldwin

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date (MO/DAY/YR)	Amount of Transaction C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
		SALE						
SP	*Example:* Mega Corporation Common Stock		10–12–03	X				
	D. Green Irrevocable Trust for Tammy Baldwin							
	First Amer Inter Govt Bd CI Y		11-24-03					

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Name Tammy Baldwin | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	GMAC Mortgage Corporation of Appleton, WIsconsin	mortgage on 809 Spaight St Madison, WI Rental Property					
JT	GMAC Mortgage Corporation of Appleton, Wisconsin	2nd mortgage on 809 Spaight St Madison, WI Rental Property					
JT	Principal Residential Mortgage of Des Moines, Iowa	mortgage on 850 4th St, SE Washington DC Rental Property		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Commonwealth Fund/Kennedy School of Government	Jan 16-20	Madison, WI - Ft Lauderdale, FL - Madison, WI	Y	Y	Y	N
	Public Governance Institute	Feb 28-Mar 2	Wash, DC - White Sulphur Springs, WV - Washington DC	Y	Y	Y	N
	American - Israel Education Foundation	Aug 2-10	Madison, WI - Israel - Madison, WI	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

THOMAS CASS BALLENGER
(Full Name)

867 20TH AVENUE DRIVE HICKORY, NC 28601
(Mailing Address)

202-225-2576
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: NC District: 10	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

4R

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	J. Cass Ballenger	5/17/04

SCHEDULE I - EARNED INCOME

Name THOMAS CASS BALLENGER

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
PLASTIC PACKAGING, INC. FAMILY BUSINESS	SALARY EXEMPT FROM RULE XLVII	$20,000
PLASTIC PACKAGING INC SPOUSE SALARY	SPOUSE SALARY	N/A
LEGISLATIVE RETIREMENT SYSTEM OF NC	PENSION	$4,492
PLASTIC PACKAGING, INC FAMILY BUSINESS	SPLIT DOLLAR PLAN EXEMPT FROM RULE XLVII	$6,807

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income) RENT 90 = ROYALTY INCOME	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	WASHINGTON APT 450 JERSEY AVE	None	RENT	$5,001 - $15,000	S
JT	RENTAL HOUSE, 12TH AVE.	$50,001 - $100,000	RENT	NONE	
	TRUSDALE #415-0 WELL	$1,001 - $15,000	RENT%	NONE	
	NORTON TAYLOR 0415 q WELL	$1,001 - $15,000	RENT%	NONE	
	WALTON WELL #1	$1,001 - $15,000	RENT%	NONE	
	GLENDALE #0415-T WELL	$1,001 - $15,000	RENT%	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	SCARMARDO PROSPECT #10H WELL (1-H)	$1,001 - $15,000	RENT%	$1 - $200	
	COMPTON 53 PROSPECT #1 WELL	$1,001 - $15,000	RENT%	NONE	
	VICI PROSPECT (VICI #1)	$1,001 - $15,000	RENT%	$1,001 - $2,500	
	VICI #2 DENNETT WELL 1-34	$1,001 - $15,000	RENT%	NONE	
	VICI #3 HUNTER WELL 1-27	$1,001 - $15,000	RENT%	NONE	
SP	VICI #3 HUNTER WELL 1-27	$1,001 - $15,000	RENT%	NONE	
	HEINE PROSPECT #0415-W WELL	$1,001 - $15,000	RENT%	NONE	
	HEINE #1-H 0415NW	$1,001 - $15,000	RENT%	NONE	
	RUNNING DUKE NO.1 H WELL	$1,001 - $15,000	RENT%	NONE	
	TRAWEEK PROSPECT #1 H WELL	$1,001 - $15,000	RENT%	NONE	
	QUALIFIED PENSION IRA	None	N/A	NONE	
	OAK ISLAND PLANTATION K-1	$1 - $1,000	PARTNERSHIP N/A	$201 - $1,000	
SP	OAK ISLAND PLANTATION K-1	$1 - $1,000	PARNTERSHIP N/A	$201 - $1,000	
	AAI/FOREST HILLS	None	PARTNERSHIP N/A	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	AAI/FOUR SEASONS	None	PARTNERSHIP N/A	NONE	
	DYCO OIL AND GAS 1992-1,1983-1,1981-2,1984-1	$1 - $1,000	PARTNERSHIP N/A	$201 - $1,000	
SP	GREAT WEST FUELS #2, LLC	$1 - $1,000	PARTNERSHIP N/A	NONE	
	GREAT WEST FUELS #2, LLC	$1 - $1,000	PARTNERSHIP N/A	NONE	
	GREAT WEST FUELS #1 LLC	$1 - $1,000	PARTNERSHIP N/A	NONE	
	T.C. BALLENGER UNITRUST	None	CHARITABLE UNITRUST	$5,001 - $15,000	
	PLASTIC PACKAGING, INC.	$5,000,001 - $25,000,000	DIVIDENDS	$15,001 - $50,000	
SP	PLASTIC PACKAGING, INC.	$250,001 - $500,000	DIVIDENDS	$1,001 - $2,500	
	PLASTIC PACKAGING ESOP	$1,001 - $15,000	NONE	NONE	
	CONGRESSIONAL FEDERAL CREDIT UNION	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	BANK OF GRANITE	$15,001 - $50,000	INTEREST	$201 - $1,000	
	BANK OF GRANITE	$15,001 - $50,000	INTEREST	$1 - $200	
	BANK OF AMERICA	$1 - $1,000	INTEREST	$1 - $200	
	BANK OF GRANITE CD	$15,001 - $50,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	ADOBE SYS	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	ALCATEL ADS	$1,001 - $15,000	DIVIDENDS	NONE	
SP	ARCHER DANIELS	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	BANK OF AMERICA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	BB&T	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	BANK OF GRANITE	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
SP	BRAZIL FUND	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	BRISTOL MYERS SQUIBB	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
SP	COMMSCOPE	$1,001 - $15,000	DIVIDENDS	NONE	
SP	CORNING	$1 - $1,000	DIVIDENDS	NONE	
SP	DIAMOND OFFSHORE DRILLING, INC.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	DOW CHEMICAL	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	DUKE ENERGY	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	ENPRO	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	GENINUE PARTS CO	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	GOODRICH COMPANY	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	INTEL CORP	$1 - $1,000	DIVIDENDS	$1 - $200	
SP	JEFFERSON PILOT CORP	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	MOTOROLA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	NCR CORPORATION	$1 - $1,000	DIVIDENDS	NONE	
SP	PEPSICO INC	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	PIEDMONT NATURAL GAS	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	SCHERING PLOUGH CORP	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	SEALED AIR CP	$15,001 - $50,000	DIVIDENDS	NONE	
SP	TEXTRON INC	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	AOL TIME WARNER	$1,001 - $15,000	DIVIDENDS	NONE	
SP	TIMKEN	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	WENDYS INTL	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	WILLIAMS CO INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	WILLIAMS CO GROUP INC	None	DIVIDENDS	NONE	
SP	WORLDCOM NEW	None	DIVIDENDS	NONE	
SP	WORLDCOM	None	DIVIDENDS	NONE	
SP	YUM BRANDS	$1,001 - $15,000	DIVIDENDS	NONE	
SP	MINNESOTA MINING AND MFG	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	MOORE CNTY NC GENERAL 4.75% BOND	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	NC MUNI PWR AGY 1 4.1% BOND	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	CHARLOTTE NC PUBLIC IMPRVMT 5.3%	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
SP	MANATEE CNTY FL WATER 9.3% BOND	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	NC MED CARE COMM 5% BOND	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
SP	CARY NC 3.25 % BOND	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	JOHNSON CNTY NC GENL	$100,001 - $250,000	INTEREST	$2,501 - $5,000	
SP	NC INFRASTRUCTURE 3.6%	$50,001 - $100,000	INTEREST	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	WAKE CNTY NC GEN	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
SP	NC MUN PWR AGY CATAWBA ELEC 5.125%	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
SP	FORSYTH CO 5.0% BOND	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	US TREASURY NOTE 9.125% BOND	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	GNMA POOL AGENCY 8.00%	$1 - $1,000	INTEREST	$1 - $200	
SP	PHOENIX SENECA STRAT THEME A	$15,001 - $50,000	DIVIDENDS	NONE	
SP	AIM DEVELOPING MKTS	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	UNIT KEMPER TAX EXEMPT INCOME TRUST	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	UNIT GSIF GOVT US TREASURY 1 MPS	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	MORGAN STANELY DW ACTIVE ASSSET MONEY TRUST) CASH	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
	ALLSTATE WACHOVIA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	ANHAUSER BUSCH	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	BANK OF AMERICA	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	CHEVERONTEXACO	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	EXXON MOBIL	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	GENERAL ELECTRIC	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	BF GOODRICH	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	INTEL	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IBM	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	JOHNSON AND JOHNSON	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	PFIZER	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	PROCTOR AND GAMBLE	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	MINNESOTA MINING AND MFG	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	UNITED TECHNOLOGIES CORP	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	WACHOVIA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	TIMKEN	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	COMMOSCOPE	$1,001 - $15,000	DIVDENDS	NONE	
	CORNING	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	FIRST CHARTER CORP	$1,001 - $15,000	DIVIDENDS	NONE	P
	PARKWAY BANK	$1,001 - $15,000	DIVIDENDS	NONE	P
	YADKIN VALLEY BANK	$1 - $1,000	DIVIDENDS	NONE	P
	COLGATE PALMOLIVE CO	None	DIVIDENDS	$1 - $200	S
	VERIZON COMMUNICATIONS	None	DIVIDENDS	$201 - $1,000	S
	CONGRA FOODS	None	DIVIDENDS	$201 - $1,000	S
	DU POINT	None	DIVIDENDS	$201 - $1,000	S
	DUKE ENERGY	None	DIVIDENDS	$1,001 - $2,500	S
	ELECTRONIC DATA SYS	None	DIVIDENDS	$1 - $200	S
	MOTOROLA	None	DIVIDENDS	$201 - $1,000	S
	ROYAL DUTCH	None	DIVIDENDS	$201 - $1,000	S
	SCHERING PLOUGH	None	DIVIDENDS	$201 - $1,000	S
	TEXTRON	None	DIVIDENDS	$201 - $1,000	S
	BB&T	None	DIVIDENDS	$201 - $1,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	EQUITY OFFICE PROPERTIES	None	DIVIDENDS	$1 - $200	S
	WACHOVIA IRA ROLLED OVER FROM RAYMOND JAMES GROWTH IRA	$100,001 - $250,000	IRA	IRA N/A	
	RAYMOND JAMES IRA GROWTH	None	N/A	N/A	
	WACHOVIA IRA ROLL OVER FROM FROM RAYMOND JAMES BRANDES	$100,001 - $250,000	IRA	IRA N/A	
	RAYMOND JAMES IRA BANDES	None	N/A	N/A	
	CASH ACCOUNT (RAYMOND JAMES	$1 - $1,000	INTEREST	$1 - $200	Other
JT	RMA (UBS PAINEWEBBER) MONEY FUNDS	$100,001 - $250,000	INTEREST	$15,001 - $50,000	
SP	UBS PAINEWEBBER MONEY FUNDS (IRA)	$15,001 - $50,000	IRA-N/A	N/A	
	HERITAGE CASH TRUST MM FUND	$1,001 - $15,000	INTEREST	$201 - $1,000	Other
SP	ANAHEUSER BUSCH	$250,001 - $500,000	DIVIDENDS	$5,001 - $15,000	
SP	AT&T WIRELESS CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	AT&T WIRELESS SERVICE	$1,001 - $15,000	DIVIDENDS	NONE	
SP	BELLSOUTH	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	BLUE RHINO CORP	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	BP PLC	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	CITIGROUP	$100,001 - $250,000	DIVIDENDS	$5,001 - $15,000	
SP	COMCAST	$1,001 - $15,000	DIVIDENDS	NONE	
SP	CORNING	$1,001 - $15,000	DIVIDENDS	NONE	
SP	CRESCENT FINANCIALCORP	$15,001 - $50,000	DIVIDENDS	NONE	
SP	DUKE ENERGY	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	FIRST SAVINGS BANCORP	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	FIRST CHARTER	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	GENL ELECTRIC	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	INTEGRITY FINANCIAL CORP(NAME CHANGE FROM UNITED CMMTY BANCORP)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	SBC COMMUNICATIONS	$15,001 - $50,000	DIVIDENDS	NONE	
SP	SOUTH FINANCIAL GROUP INC (NAME CHANGE FROM MOUNTAIN BANK)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	TRAVELERS PROPERTY CASUALTY CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	UNITED FINANCIAL INC	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

SP	VERIZON COM	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
SP	VODAFONE GROUP AIRTOUCH PLC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	RMA MONEY MKT	$100,001 - $250,000	INTEREST	$201 - $1,000	
SP	CHARLOTTE MECK HOSP AUTH 1/15/22	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	NC MUNI PWR AGY	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	NORTH CAROLINA ST	$50,001 - $100,000	INTEREST	$201 - $1,000	P
SP	UNITED COMMUNITY BANCORP	$1,001 - $15,000	DIVDENDS	$1 - $200	Other
SP	MOUNTAIN BANK FINANCIAL	$15,001 - $50,000	DIVIDENDS	NONE	Other
	EVERGREEN PRIME CASH (7040)	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	APOLLO GRP	$1,001 - $15,000	DIVIDENDS	NONE	P
	GENERAL ELECTRIC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	LOCKHEED MARTIN	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	DOW CHEMICAL	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	PHELPS DODGE CORP	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	ANHEUSER BUSCH	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	GILLETTE CO COM	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	PEPSICO INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	PROCTOR AND GAMBLE	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	WAL MART STORES	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	BEST BUY	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	EBAY INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	FAMILY DLR STORES	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	INTERNATIONAL GAME TECH	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	LOWES CO	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	MCRAW HILL COS	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	STAPLES	$1,001 - $15,000	DIVIDENDS	NONE	P
	AFFLIATED COMPUTER SVCS	$1,001 - $15,000	DIVIDENDS	NONE	P
	AVAYA INC	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	CISCO SYS INC	$1,001 - $15,000	DIVIDENDS	NONE	
	CISCO SYS INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	COMVERSE TECH	$1,001 - $15,000	DIVIDENDS	NONE	P
	DELL INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	EMC CORP MASS	$1,001 - $15,000	DIVIDENDS	NONE	P
	ELECTRONIC ARTS	$1,001 - $15,000	DIVIDENDS	NONE	P
	FIRST DATA CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	INTEL CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	INTL BUSINESS MACHINES	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	MICROSOFT	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	ORACLE CORP	$1,001 - $15,000	DIVIDENDS	NONE	P
	QLOGIC CORP	$1,001 - $15,000	DIVIDENDS	NONE	P
	QUALCOMM INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	TEXAS INSTRS INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	VERITAS SOFTWARE CORP	$1,001 - $15,000	DIVIDENDS	NONE	P
	ABBOTT LABS	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	AMGEN INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	ANTHEM INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	CR BARD INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	BRISTOL MYERS SQUIBB	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	CARMARK RX	$1,001 - $15,000	DIVIDENDS	NONE	P
	FOREST LABS INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	JOHNSON AND JOHNSON	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	MEDTRONIC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	MERCK AND CO	$1,001 - $15,000	DIVIDENDS	NONE	P
	PFIZER	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	SELECT MED CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	UNITEDHEALTH GRP INC	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	APACHE CORP	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	NEXTEL COMM CORP	$1,001 - $15,000	DIVIDENDS	NONE	P
	AFLAC INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	AMERICAN EXPRESS INC	$1,001 - $15,000	DIVIDENDS	NONE	P
	CITIGROUP INC	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	GOLDMAN SACHS	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	SEALED AIR PRF SERIES A	None	INTEREST	$1 - $200	S
SP	FAYETTEVILLE NC PUB WKS 4.6% BOND	None	INTEREST	$1 - $200	S
SP	CABARRUS CNTY FL WATER 9.3% BOND	None	INTEREST	$1 - $200	S
SP	MOUNT AIRY NC GENERAL 4.9% BOND	None	INTEREST	$1 - $200	S
SP	NC MED CARE COMMN 5.5% BOND	None	INTEREST	$1 - $200	S
SP	LUCENT TECHNOLOGIES	None	DIVIDENDS	NONE	S
SP	QWEST COMMUNICATIONS	None	DIVIDENDS	NONE	S
	RAYMOND JAMES	None	DIVIDENDS	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name THOMAS CASS BALLENGER

	SIEBEL SYSTEMS	None	DIVIDENDS	NONE	S
	HERITAGE GROWTH EQUITY	None	DIVIDENDS	NONE	S

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	BRISTOL MYERS SQUIBB	P	06/01/03	$15,001 - $50,000
SP	DOW CHEMICAL	P	07/15/03	$15,001 - $50,000
SP	ENPRO	P	06/02/03	$1,001 - $15,000
SP	NORTH CAROLINA INFRASTRUCTURE 3.6% BOND	P	07/15/03	$50,001 - $100,000
SP	SEALED AIR PRF SERIES A	S	07/18/03	$15,001 - $50,000
SP	FAYETTEVILLE NC PUB WKS 4.6% BOND	S	11/06/03	$15,001 - $50,000
SP	CABARRUS CNTY NC 4.5% BOND	S	09/02/03	$15,001 - $50,000
SP	MOUNT AIRY NC GENERAL 4.9% BOND	S	02/03/03	$15,001 - $50,000
SP	NC MED CARE COMMN 5.5 % BOND	S	10/01/03	$15,001 - $50,000
SP	NC MED CARE COMMN 5.5% BOND	S	11/24/03	$1,001 - $15,000
	JANUS CAPITAL	PS	09/05/03	$1,001 - $15,000
	BED BATH AND BEYOND	PS	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	CAREMARK RX INC	PS	09/05/03	$1,001 - $15,000
	BLACK AND DECKER CORP	PS	09/05/03	$1,001 - $15,000
	PEPISCO INC	PS	09/05/03	$1,001 - $15,000
	EMULEX CORP	PS	09/05/03	$1,001 - $15,000
	TRIBUNE CO NEW	PS	09/05/03	$1,001 - $15,000
	LEHMAN BROS	PS	09/05/03	$1,001 - $15,000
	MARSH AND MCLENNAN COS	PS	09/05/03	$1,001 - $15,000
	COLGATE PALMOLIVE CO	PS	09/05/03	$1,001 - $15,000
	MCDATA CORP	PS	09/05/03	$1,001 - $15,000
	BANK OF AMERICA	S	09/05/03	$15,001 - $50,000
	EXXON MOBIL	S	09/05/03	$50,001 - $100,000
	GENERAL ELECTRIC	S	09/05/03	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	INTEL CORP	S	09/05/03	$1,001 - $15,000
	IBM	S	09/05/03	$1,001 - $15,000
	JOHNSON AND JOHNSON	S	09/05/03	$1,001 - $15,000
	PFIZER	S	09/05/03	$1,001 - $15,000
	PROCTOR AND GAMBLE	S	09/05/03	$15,001 - $50,000
	VERIZON	S	09/05/03	$1,001 - $15,000
	BANK OF AMERICA	S	10/20/03	$1,001 - $15,000
	BANK OF AMERICA	S	10/30/03	$1,001 - $15,000
	BANK OF AMERICA	S	11/25/03	$1,001 - $15,000
	DUKE ENERGY	S	09/25/03	$1,001 - $15,000
	CONAGRA FOODS	S	09/25/03	$1,001 - $15,000
	DU POINT	S	09/25/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	DUKE ENERGY	S	09/25/03	$15,001 - $50,000
	ELECTRONIC DATA SYSTEM	S	09/25/03	$1,001 - $15,000
	MOTOROLA INC	S	09/25/03	$1,001 - $15,000
	RAYMOND JAMES FIN	S	09/25/03	$1,001 - $15,000
	ROYAL DUTCH PETE CO	S	09/25/03	$15,001 - $50,000
	SCHERING PLOUGH	S	09/25/03	$15,001 - $50,000
	SIEBEL SYS INC	S	09/25/03	$1,001 - $15,000
	TEXTRON	S	09/25/03	$15,001 - $50,000
	VERIZON COMM	S	09/25/03	$1,001 - $15,000
	BB&T	S	10/20/03	$15,001 - $50,000
	HERITAGE GROWTH EQUITY	S	05/06/03	$1,001 - $15,000
	EQUITY OFFICE PROPERTIES	S	05/06/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	NORTH CAROLINA ST	P	02/25/03	$100,001 - $250,000
SP	CRESCENT FINANCIAL CORP	S	04/25/03	1-200
SP	UNITED COMMUNITY BANCORP NAME CHANGE	Other	01/01/03	$1,001 - $15,000
	FIRST CHARTER CORP	P	09/05/03	$1,001 - $15,000
	PARKWAY BANK	P	09/05/03	$1,001 - $15,000
	YADKIN VALLEY BANK	P	09/05/03	$1,001 - $15,000
SP	MOUNTAIN BANK FINANCIAL NAME CHANGE	Other	01/01/03	$15,001 - $50,000
	WASHINGTON APT 450 JERSEY AVE	S	10/01/03	$500,001 - $1,000,000
	APOLLO GRP 7040	P	09/05/03	$1,001 - $15,000
	WAL MART STORES	P	09/05/03	$1,001 - $15,000
	FAMILY DLR STORES	P	09/05/03	$1,001 - $15,000
	INTERNATIONAL GAME TECH	P	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	MCRAW HILL COS	P	09/05/03	$1,001 - $15,000
	STAPLES	P	10/20/03	$1,001 - $15,000
	AFFLIATED COMPUTER SVCS	P	09/05/03	$1,001 - $15,000
	AVAYA INC	P	11/25/03	$1,001 - $15,000
	DELL INC	P	09/05/03	$1,001 - $15,000
	EMC CORP MASS	P	09/05/03	$1,001 - $15,000
	ELECTRONIC ARTS	P	09/05/03	$1,001 - $15,000
	FIRST DATA CORP	P	09/05/03	$1,001 - $15,000
	INTEL CORP	P	10/20/03	$1,001 - $15,000
	INTL BUSINESS MACHINES	P	09/05/03	$1,001 - $15,000
	MICROSOFT	P	09/05/03	$1,001 - $15,000
	APACHE CORP	P	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	NEXTEL COMM CORP	P	09/05/03	$1,001 - $15,000
	AFLAC INC	P	09/05/03	$1,001 - $15,000
	AMERICAN EXPRESS INC	P	10/30/03	$1,001 - $15,000
	CITIGROUP INC	P	09/05/03	$1,001 - $15,000
	GOLDMAN SACHS	P	09/05/03	$1,001 - $15,000
	EVERGREEN PRIME CASH	P	09/05/03	$1,001 - $15,000
	GENERAL ELECTRIC	P	09/05/03	$1,001 - $15,000
	LOCKHEED MARTIN	P	09/05/03	$1,001 - $15,000
	DOW CHEMICAL	P	09/05/03	$1,001 - $15,000
	PHELPS DODGE CORP	P	10/02/03	$1,001 - $15,000
	ANHEUSER BUSCH	P	09/05/03	$1,001 - $15,000
	GILLETTE CO COM	P	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	PEPSICO INC	P	09/05/03	$1,001 - $15,000
	PROCTOR AND GAMBLE	P	09/05/03	$1,001 - $15,000
	WAL MART STORES	P	09/05/03	$1,001 - $15,000
	LOWES CO	P	09/05/03	$1,001 - $15,000
	CISCO SYS INC	P	09/05/03	$1,001 - $15,000
	COMVERSE TECH	P	10/02/03	$1,001 - $15,000
	ORACLE CORP	P	09/05/03	$1,001 - $15,000
	QLOGIC CORP	P	09/05/03	$1,001 - $15,000
	QUALCOMM INC	P	09/17/03	$1,001 - $15,000
	TEXAS INSTRS INC	P	09/05/03	$1,001 - $15,000
	VERITAS SOFTWARE CORP	P	10/20/03	$1,001 - $15,000
	ABBOT LABS	P	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	AMGEN INC	P	09/05/03	$1,001 - $15,000
	ANTHEM INC	P	09/05/03	$1,001 - $15,000
	CR BARD INC	P	09/05/03	$1,001 - $15,000
	BRISTOL MYERS SQUIBB	P	09/05/03	$1,001 - $15,000
	CARMARK RX	P	09/05/03	$1,001 - $15,000
	FOREST LABS INC	P	11/25/03	$1,001 - $15,000
	JOHNSON AND JOHNSON	P	09/05/03	$1,001 - $15,000
	MEDTRONIC	P	09/05/03	$1,001 - $15,000
	MERCK AND CO	P	09/05/03	$1,001 - $15,000
	PFIZER	P	09/05/03	$1,001 - $15,000
	SELECT MED CORP	P	11/25/03	$1,001 - $15,000
	UNITEDHEALTH GRP INC	P	09/05/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name THOMAS CASS BALLENGER

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	BEST BUY	P	10/02/03	$1,001 - $15,000
	EBAY INC	P	09/05/03	$1,001 - $15,000
	AMGEN INC	P	09/05/03	$1,001 - $15,000
SP	AVAYA INC	S	01/06/03	1-200
SP	COMMSCOPE	S	01/06/03	$1,001 - $15,000
SP	LUCENT TECHNOLOGIES	S	01/06/03	$1,001 - $15,000
SP	QWEST COMMUNCIATION	S	01/06/03	$1,001 - $15,000
SP	LUCENT TECHNOLOGIES	S	09/05/03	$1,001 - $15,000

SCHEDULE VIII - POSITIONS

Name THOMAS CASS BALLENGER

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
CHAIRMAN OF THE BOARD	PLASTIC PACKAGING, INC
LIMITED PARTNER	ASSOCIATED APARTMENT INVESTORS
LIMITED PARTNER	OAK PLANTATION ASSOCIATIONS, LTD
LIMITED PARTNER	DYCO PETROLEUM

SCHEDULE IX - AGREEMENTS

Name THOMAS CASS BALLENGER

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
JAN 15, 1998	SEE ATTACHED LETTER	EARNED INCOME EXEMPTION

CASS BALLENGER
10TH DISTRICT, NORTH CAROLINA
DEPUTY MAJORITY WHIP
REPUBLICAN STEERING COMMITTEE
COMMITTEE ON EDUCATION AND THE WORKFORCE
COMMITTEE ON WORKFORCE PROTECTIONS (CHAIRMAN)
EMPLOYER-EMPLOYEE RELATIONS
INTERNATIONAL RELATIONS COMMITTEE
SUBCOMMITTEE ON WESTERN HEMISPHERE
SUBCOMMITTEE ON INTERNATIONAL OPERATIONS AND HUMAN RIGHTS

Congress of the United States
House of Representatives
Washington, DC 20515–3310

2162 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–3310
202–225–3576
cass.ballenger@mail.house.gov

DISTRICT OFFICES:
P.O. BOX 1820
361–10TH AVENUE DRIVE, NE
HICKORY, NC 28603
704–327–6160
1–800–477–2578 TOLL FREE

P.O. BOX 1381
2554 LENDSVILLE–CLEMMONS ROAD
SUITE 107
CLEMMONS, NC 27012
910–766–9425

January 15, 1998

The Honorable James V. Hansen
Chairman
Committee On Standards of Official Conduct
HT2 Capitol
Washington, D. C. 20515

Dear Mr. Chairman:

I am writing to request clarification on the rules governing outside earned income as it relates to a consulting fee I currently receive from my company (see attached letters and replies), as well as a new fringe benefit my company has agreed to offer to me.

As you can see from the attached letters, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my prinicpal family investment, and I view it important to remain associated with the business to assure that my investment is protected. In previous reponses from the Committee, this annual amount has not been counted as outside earned income for the purposes of the limitation in Rule XLVII.

Now, in recognition of the services I provide to my company, it has agreed to sponsor a life insurance benefit for me. The life insurance benefit consists of life insurance on my life alone, and life insurance that matures upon the death of the survivor of myself and my wife, Donna. The life insurance benefit is structured under what is known as a Split-Dollar Plan.

The economic benefit that is represented by the life insurance under the Split-Dollar Plan will be reported as income for tax purposes. The value of the benefit for 1997 is approximately $9,500. Given the earlier determination by the Committee as it relates to the $20,000 consulting fee, may I accept the $9,500 without violating the outside earned income limitation of $20,040? I would appreciate advice relative to this matter for calendar year 1997 and beyond.

If you have questions or need clarification on any point, please call me or have your staff

The Honorable James V. Hansen
January 15, 1998
Page 2

contact my Chief-of-Staff, Patrick Murphy, at 52576. Thank you for your prompt attention to this matter.

Sincerely,

Cass

CASS BALLENGER
Member of Congress

CB:pm

Enclosures (3)

ES V. HANSEN, UTAH
HAIRMAN
AR SMITH, TEXAS
L. NEFLEY, COLORADO
R GOODLATTE, VIRGINIA
E KNOLLENBERG, MICHIGAN

RICHARD L. BERMAN, CALIFORNIA
RANKING DEMOCRATIC MEMBER
MARTIN OLAV SABO, MINNESOTA
ED PASTOR, ARIZONA
CHAKA FATTAH, PENNSYLVANIA
ZOE LOFGREN, CALIFORNIA
SUITE HT-2, THE CAPITOL
(202) 225-7103

ONE HUNDRED FIFTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

February 20, 1998

FEB 25 1998

The Honorable Cass Ballenger
U.S. House of Representatives
2182 Rayburn House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your letter of January 15, 1998 regarding your earned income from Plastic Packaging, Inc., a company that you founded and in which you have the controlling interest. In substance, the question posed in your letter is whether you may accept from the company, in addition a $20,000 per year consulting fee, a life insurance benefit that the company is sponsoring for you in recognition of your services to the company. Your letter states that the benefit is structured under a Split-Dollar Plan, the economic benefit of which is reported as income for tax purposes, and that the value of the benefit for 1997 is approximately $9,500.

As your letter recognizes, while the outside earned income of Members and senior staff is limited by both statute and House rule[1], clause 4(e) of House Rule 47 explicitly excepts a number of items from the definition of the term "outside earned income," and hence from the outside earned income limitation. One part thereof, clause 4(e)(4), provides an exception for income from a family business in the following circumstances:

> in the case of a Member, officer or employee engaged in a trade or business in which the individual or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such individual so long as the personal services actually rendered by the individual in the trade or business do not generate a significant amount of income.

Thus this provision excepts from the outside earned income limit amounts that a Member receives from a business where three requirements are satisfied: (1) the Member or his family holds a controlling interest in the business, (2) the nature of the business is such that both personal services and capital are income-producing factors, and (3) the personal services that the Member renders for the business are of a nature that they do not generate a significant amount of money. The intent of this provision, as reflected in the report of the House Commission on Administrative Review, was that,

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[1] 5 U.S.C. app. 4 §501(a); House Rule 47, cl. 1(a).

The Honorable Cass Ballenger
February 20, 1998
Page 2

> Members should be able to render personal services to manage or protect their equity in a family trade or business without having to allocate these personal services toward the 15-percent limitation.

H.Doc. 95-73, 95th Cong., 1st Sess. (Feb. 14, 1977).

In letters to you of February 25, 1987 and October 27, 1990, copies of which you attached to your current letter, the Committee determined the provision's requirements were satisfied with regard to Plastic Packaging and the consulting services (of up to 400 hours per year) that you render for the company, and that hence the $20,000 per year fee that you receive for those services would not be counted toward the outside earned income limit.[2] Both of those letters reflected the Committee's view that your limited efforts in behalf of the company appeared to be aimed at preserving your equity in the company, consistent with the intent of the provision, rather than generating income for the company.

The Committee understands from your current letter that you continue to have the controlling interest in Plastic Packaging. In view of the Committee's prior determinations regarding your consulting fee from the company, the economic benefit of the Split-Dollar Plan life insurance that the company is sponsoring for you, as described in your letter, likewise need not be counted as outside earned income for purposes of the outside earned income limit – provided, however, that there has been no significant change since 1990 in either the nature of the business of Plastic Packaging, or the nature or level of the services that you render for the company. If any such changes have occurred, you should contact the Committee for further advice. Otherwise, the economic benefit of the life insurance, like your consulting fee, should be reported on your annual Financial Disclosure Statement.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

James V. Hansen
Chairman

Howard L. Berman
Ranking Democratic Member

---

[2] The Committee's letter of October 27, 1990 also reflected the Committee's determination that the consulting fee you receive from the company does not violate the "fiduciary relationship" provisions of the Ethics in Government Act and the House rules that took effect of January 1, 1991. 5 U.S.C. app. 4 §502(a); House Rule 47, cl. 2.

278 Cannon House Office Building
Washington, DC 20515
202-225-2576

COMMITTEES:
EDUCATION AND LABOR
PUBLIC WORKS AND TRANSPORTATION

Congress of the United States
House of Representatives
Washington, DC 20515

Charlotte, NC 28202
704-377-4100

P.O. Box 176
418 South Street
Gastonia, NC 28053
704-864-9322

March 20, 1990

The Honorable Julian Dixon
Chairman
The Committee on Standards of
Official Conduct
HT-2, U.S. Capitol
Washington, D.C. 20515

Dear Julian:

I would appreciate clarification on limitations on outside earned income as it relates to a consulting fee I currently receive (see attached letter) from my company, in light of the changes mandated by the Ethics Reform Act of 1989 (Public Law 101-194).

As you can see from the attached letter, I have been permitted to receive $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. Plastic Packaging, Inc., a company I founded and in which I have controlling interest, is my principal family investment and I view it important to remain associated with the business to assure that my investment is protected.

Please advise me relative to any exemption of these fees from the limits on outside income for calendar year 1990 as prescribed under clause 2(b)(1) of House Rule XLVII as revised by Public Law 101-194. Further, I would appreciate advice relative to this matter for calendar year 1991 and beyond.

If you have questions or need clarification on any point, please call me or have your staff contact my administrative assistant, Patrick Murphy, at 225-2576.

Thank you for your prompt attention to this matter.

Sincerely,

Cass Ballenger

CASS BALLENGER
Member of Congress

CB:pm

Enclosure

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515

February 25, 1987

The Honorable Cass Ballenger
United States House of Representatives
116 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter of January 16, 1987, requesting the advice of this Committee regarding the propriety of your receipt of certain compensation from Plastic Packaging, Inc. Your correspondence elaborates on information provided in an earlier meeting with Committee Counsel Mark Davis.

You explain that you served as President of Plastic Packaging, Inc., from its founding in 1956 until your election to the House of Representatives. While you remain the majority stockholder and Chairman of the Board, you no longer have day-to-day operating responsibilities. In lieu of the salary previously paid to you, Plastic Packaging, Inc., intends to pay you $20,000 per year for as much as 400 hours of consulting services on implementation of corporate policy decisions. You further explain that Plastics Packaging, Inc., is your principal family investment, and you view it important to remain associated with the business to assure that your investment is protected.

The provision implicated by your inquiry is House Rule XLVII, which limits the amount of outside earned income which a Member of the House of Representatives may receive in a calendar year to 30 percent of the Member's aggregate yearly congressional salary. As provided in the Rule, the term "outside earned income" means "wages, salaries, professional fees, honoraiums, and other amounts ... received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(d)(4) of Rules XLVII specifically states that outside earned income does not include--

> in the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received

> by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

The Committee is of the opinion that the services you will be performing for Plastic Packaging, Inc., and compensation in the amount specified, fall within the stated exemption. The purpose of the exemption, as stated by the Commission on Administrative Review of the 95th Congress, is to enable Members to protect their interest in a family business. (See, House Document 95-73, p. 11; see also, Advisory Opinion No. 13, House Select Committee on Ethics, 95th Congress.) Further evidence of the fact that your efforts are aimed at preserving your equity, rather than generating a significant amount of income, is the limited time you plan to devote to the business. The Committee also notes that the amount of compensation you will be receiving from the corporation is substantially less than that reported for prior years on the Financial Disclosure Statement which you filed as a candidate.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year. For purposes of clarity, we suggest that you note on the Statement that this income is from a family business and exempt from application of Rule XLVII.

If you have any further questions concerning this matter, please contact the Committee staff at extension 5-7103.

Sincerely,

Julian C. Dixon
Chairman

Floyd D. Spence
Ranking Minority Member

JS:MJD

C. DANIEL MANN, OHIO
JOHN J. FLOWER, NEW JERSEY
JOHN BUCHANAN, WEST VIRGINIA
J. W. DAVIS, PENNSYLVANIA
JOE D. TIBBES, MASSACHUSETTS
(202) 225-7103

LARRY E. CRAIG, IDAHO
FRED GRANDY, IOWA
RALPH L. LOTTON, CHIEF COUNSEL

U.S. House of Representatives

Committee on Standards of Official Conduct
Suite HC-2, U.S. Capitol
Washington, DC 20515

October 27, 1990

The Honorable Cass Ballenger
U.S. House of Representatives
218 Cannon House Office Building
Washington, D. C. 20515

Dear Colleague:

This is in response to your letter requesting clarification of the limitations on outside earned income as it relates to a consulting fee you receive from your company. The Committee originally addressed this matter in a letter of February 25, 1987, a copy of which you enclosed with your correspondence.

You explain that while a Member of the House you have accepted $20,000 per year from Plastic Packaging, Inc., for as much as 400 hours of consulting services on implementation of corporate policy decisions. You founded the company and have retained controlling interest in it. It is your principal family investment and you continue to view it important to remain associated with the business to assure that your investment is protected. Consistent with Committee advice, this income has not been treated as subject to the earned income limit of House Rule XLVII. In light of the changes mandated by the Ethics Reform Act of 1989 (P.L. 101-194 as amended by P.L. 101-280), you ask if the Committee's earlier advice continues to apply to your situation.

In 1987, you told the Committee that you were Chairman of the Board of Plastic Packaging, Inc., in addition to being majority stockholder. Your Administrative Assistant, Patrick Murphy, has informed Committee Counsel Mark Davis that this continues to be the case. While the corporation does provide you with transportation to attend board meetings, you receive no compensation other than the $20,000 consulting fee.

Several provisions of Federal law and House rules, as amended by the Ethics Reform Act of 1989, are relevant to your inquiry. Members of the House are limited in the amount of outside earned income they may receive in a calendar year by House Rule XLVII. For calendar year 1990, the outside earned income limit is 30 percent of the aggregate yearly congressional salary paid in 1989, or $26,850. House Rule XLVII, clause 1(b)(1). For calendar years after 1991, the earned income limit

will be 15 percent of the January 1 rate of pay in effect for level II of the Executive Schedule (the same rate at which House Members are paid). House Rule XLVII, clause 1(a)(2); see also section 501(a) of the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 7, §501(a), hereinafter cited as "EIGA".

"Outside earned income" is defined in Rule XLVII, clause 3(e), to mean "wages, salaries, fees, and other amounts received or to be received as compensation for personal services actually rendered." Several exemptions are noted, however. Clause 3(e)(4) of Rule XLVII specifically states that outside earned income does not include—

> [I]n the case of a Member engaged in a trade or business in which the Member or his family holds a controlling interest and in which both personal services and capital are income-producing factors, any amount received by such Member so long as the personal services actually rendered by the Member in the trade or business do not generate a significant amount of income.

Even if compensation is consistent with the definition of "outside earned income" or falls within one of the stated exemptions, certain activities for compensation will be totally prohibited by Federal law and House Rule XLVII beginning January 1, 1991. Section 502 of EIGA (5 U.S.C. app. 7, §502), provides, in pertinent part, that Members of the House, as well as other senior government officials, shall not —

> (1) receive compensation for affiliating with or being employed by a firm, partnership, association, corporation, or other entity which provides professional services involving a fiduciary relationship;
>
> (2) permit that Member's . . . name to be used by any such firm, partnership association, corporation, or other entity;
>
> (3) receive compensation for practicing a profession which involves a fiduciary relationship; [or]
>
> (4) serve for compensation as an officer or member of the board of any association, corporation, or other entity.

See also House Rule XLVII, clause 2.

October 27, 1990
Page 3

The statute does not define what constitutes "professional services which involve a fiduciary relationship." That determination has been left to this Committee with respect to House Members and staff, pursuant to its authority under sections 503(1)(A) and 504(b) of EIGA (5 U.S.C. app. 7, §§503(a)(A) and 504(b)). See Report of the House Bipartisan Task Force on Ethics on H.R. 3660, p. 16, Cong. Rec. (daily ed.), Nov. 21, 1989, E9257.

The legislative history of the Ethics Reform Act suggests the primary objectives behind enactment of the prohibition on the paid practice of a profession which involve a fiduciary relationship. The first was to prevent any conflict between the responsibility of a public official to act for the common good and the obligation which would be owed a private client paying compensation. The second was to make certain that official position was not being used for private gain. The third objective was to "ensure that honoraria not reemerge in various kinds of professional fees from outside interests." See Task Force Report, supra, pp. 15-16.

To determine whether employment in which a Member proposes to engage is prohibited under the statute, the Committee is looking at more than the title of the position and the kind of services typically performed by those in the occupation. Subject to further legislative guidance, the Committee is evaluating the nature and circumstances of each individual's particular employment on a case-by-case basis in light of the objectives of the Ethics Reform Act.

With respect to your services for Plastic Packaging, Inc., you are serving as Chairman of the Board but are receiving no compensation other than the consulting fee. (Your receipt of travel expenses to attend board meetings is not considered compensation.) You were paid by Plastic Packaging prior to your election to the House of Representatives, but the $20,000 consulting fee is significantly less than you had been receiving. In addition, the payment is consistent with the policy enunciated in House Rule XLVII to permit a Member to accept compensation to protect his interest in a family business. Your limited efforts appear aimed at preserving your equity, rather than generating income for the company. Such continuing service related to a family-controlled business suggests neither a significant conflict between public and private obligations, nor accrual of a benefit on account of your status as a Member of Congress. Furthermore, payments to you are not in consideration of speeches, appearances, or articles.

Based on the above considerations, we are of the opinion that the services you perform for Plastic Packaging, Inc., and the specified compensation you receive, continue to fall within the cited exemption in House Rule XLVII. Furthermore, your

receipt of this compensation will not be prohibited after January 1, 1991, since we do not view you as performing "professional services involving a fiduciary relationship" for the purposes of section 502 of ETGA and House Rule XLVII.

While this compensation will not be counted as outside earned income for the purposes of the limitation in Rule XLVII, please note that it still must be reported on the Financial Disclosure Statement you are required to file as a Member of the House of Representatives by May 15th of each year.

As stated above, this opinion is subject to reconsideration based on subsequent enactment of legislation or rule changes. If you have any further questions concerning this matter, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

Julian C. Dixon
Chairman

John T. Myers
Ranking Minority Member

JS:MJD

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(7)

LEGISLATIVE RECORDS OFFICE
2004 MAY 13 PM 3:10
U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

JAMES GRESHAM BARRETT
(Full Name)

125 STONEWALL DRIVE
(Mailing Address)

1-202-225-5301
Daytime Telephone:

WESTMINSTER SC 29693

Filer Status: [x] Member of the U.S. House of Representatives — State: SC District: 03 — [ ] Officer or Employee — Employing Office:

Report Type: [x] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [x]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		4-11-04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
BARRETT'S FURNITURE INC. WESTMINSTER SC	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name JAMES GRESHAM BARRETT | Page 3 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC	Examples: Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	OPPENHEIMER FUNDS (GLOBAL FUND)			X										X								X										
Sp	COMMERCIAL BUILDING WINDSOR ST. WESTMINSTER SC	X													X						X											S
Sp	CONDO, UNIT 64 HERON MARSH VILLAS, PAWLEYS ISLAND, SC							X							X										X							P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES GRESHAM BARRETT Page 4 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	SOUTH CAROLINA STATE RETIREMENT SYSTEM		X								PENSION	X						
	IRA ACCOUNT @ GUARDIAN - VARIABLE PRODUCTS ADMINISTRATION		X								PENSION	X						
SP	IRA - PIONEER INVESTMENTS		X								PENSION	X						
SP	STOCK - BARRETTS FURNITURE COMPANY, WESTMINSTER SC				X			X				X						
JT	OPPENHEIMER EQUITY FUND		X					X					X					
JT	OPPENHEIMER HIGH YIELD FUND	X						X										

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SCHEDULE IV — TRANSACTIONS

Name JAMES GRESHAM BARRETT | Page 5 of 7

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
SP	COMMERCIAL BUILDING / WINDSOR ST WESTMINSTER, SC		X		01-01-03					X					
SP	RENTAL CONDO, UNIT 64, HERON MARSH VILLAS, PAWLEYS ISLAND, SC	X			01-15-03					X					

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	COMMUNITY FIRST BANK, SOUTH CAROLINA - PMO AUTO DEC 03	CAMPAIGN LOAN					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
-NA-		

Use additional sheets if more space is required.

Name James Gresham Barrett | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Nuclear Energy Inst.	Aug 12-15	GSP – Las Vegas - GSP	Y	Y	Y	1 Day

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

INSIDE MAIL

2004 MAY 14 AM 11:34

(Office Use Only)

Dr. Roscoe G. Bartlett, Jr.
(Full Name)

4317 Buckeystown Pike Frederick, MD 21704
(Mailing Address)

202-225-2721
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: MD District: 06	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bartlett	5/12/04

SCHEDULE I - EARNED INCOME

Name Dr. Roscoe G. Bartlett, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Maryland State Retirement System	Pension	$14,960.70

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Dr. Roscoe G. Bartlett, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	House & lot 10399 Liberty Rd. Mt. Pleasant, MD	$250,001 - $500,000	none	NONE	
JT	house 230 Knoxville Rd. Knoxville, MD	50,001- 100,000	none	NONE	
JT	80 acres and home 19067 Three Mile Highway Onaway, MI	50,001-100,000	rent	1,001-2,500	
JT	house & lot 3444 Big Woods Rd. Frederick, MD	50,001-100,000	none under construction	NONE	
JT	4317 Buckeystown Pike Frederick, MD	1,000,001- 5,000,000	rent	50,001-100,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Dr. Roscoe G. Bartlett, Jr.

JT	Frederick County Bank	1,001-15,000	interest	201-1,000	
JT	Precious metals	50,001- 100,000	none/none	NONE	
JT	Putnam Bonds	1,001-15,000	interest	201-1,000	
JT	153 acres & 2 houses Spruce Knob Lake Forest Service Rd Pocahontas County, WV	100,001- 250,000	none	NONE	

SCHEDULE IV - TRANSACTIONS

Name Dr. Roscoe G. Bartlett, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	.5 acres lot 49 Thurmont East Thurmont, MD	S	11-01-03	$50,001 - $100,000

ROSCOE G. BARTLETT
6TH DISTRICT, MARYLAND

2412 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2721

GARRETT-ALLEGANY COUNTIES
1-800-889-3012

HOWARD COUNTY
1-800-705-2385

UNITED STATES
HOUSE OF REPRESENTATIVES

COMMITTEES
ARMED SERVICES
SUBCOMMITTEES
CHAIRMAN
MORALE, WELFARE AND RECREATION PANEL
MILITARY INSTALLATIONS AND FACILITIES
MILITARY RESEARCH AND DEVELOPMENT

SCIENCE
SUBCOMMITTEES
CHAIRMAN
ENERGY
SPACE AND AERONAUTICS

SMALL BUSINESS
SUBCOMMITTEES
REGULATORY REFORM AND OVERSIGHT
RURAL ENTERPRISES, AGRICULTURE, AND TECHNOLOGY

HAND DELIVERED

mc

May 25, 2004

Jeff Trandahl
Clerk of the Court
B 106 Cannon HOB

Dear Mr. Trandahl,

Please amend my financial disclosure statement for 2003 with the following information:
House & Lot
10401 Liberty Rd. (not 10399 Liberty Rd.)
Mt. Pleasant, MD

After the statement was filed, I noticed the discrepancy . Thank you for your attention to this matter.

Sincerely,

Roscoe G. Bartlett
Member of Congress

2004 JUN -3 PM 2:05

HAND DELIVERED

5831 BUCKEYSTOWN PIKE
SUITE E
FREDERICK, MD 21704
(301) 694-1030

100 WEST FRANKLIN
HAGERSTOWN, MD 21740
(301) 797-6043

1 FREDERICK STREET
SUITE 2
CUMBERLAND, MD 21502
(301) 724-3105

15 EAST MAIN STREET
SUITE 110
WESTMINSTER, MD 21157
(410) 857-1115

HAND DELIVERED

(9)

LEGISLATIVE RESOURCE CENTER

2004 MAY 14 AM 10:49

MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Joe Linus Barton
(Full Name)

2109 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-2002
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: TX District: 06	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Joe Barton	05-12-2004

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Joe Linus Barton

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Independent Petroleum Association of America	Speech	March 5, 2003	$500
The Public Forum Institute	Speech	March 31, 203	$2,000
National Energy Marketers Association	Speech	April 8, 2003	$1,000
American Society of Mechanical Engineers	Speech	Sept. 24, 2003	$500
Methanol Institute	Speech	Oct. 16, 2003	$1,000
Charles Schwab & Co.	Speech	Oct. 28, 2003	$2,000
National Hydropower Association	Speech	April 7, 2003	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joe Linus Barton

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Cripple Creek #99	$15,001 - $50,000	RENT	$1,001 - $2,500	
Ennis Business Forms	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
Reliant Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Enron	None	DIVIDENDS	NONE	
SBC Corporation	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
TXU Corporation	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joe Linus Barton

	Wal-Mart	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE V - LIABILITIES

Name Joe Linus Barton

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	First American Bank Bryan, Texas	Mortgage on Cripple Creek Condo, 904 University Oaks, #99 College Station, Texas	$15,001 - $50,000

SCHEDULE VI - GIFTS

Name Joe Linus Barton

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
IEEE Power Engineering Society	Texas Ranger Bust Limited Edition Bronze by Covelle Jones given to commemorate speech made in district	$500

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Joe Linus Barton

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Consumer Electronics Association	Jan 9 -12	Wash.,D.C.-Las Vegas - LasVegas to Dallas	Y	Y	N	N/A
Association of American Railroads	Jan 17	DFW to Miami one way	Y	Y	N	N/A
Electric Power Supply Association	Jan 19 - 20	Aventura, Fl to Bonita Springs, FL to DFW	Y	Y	N	N/A
Texas Independent Producers & Royalty Owners Association	June 8	DFW to San Antonio to Wash, D.C/	Y	Y	N	N/A
National Society of Professional Engineers	July 11 - 12	Dallas to San Antonio to Dallas	Y	Y	N	N/A
Edison Electric Institue	Sept 1 - 3	BWI to Colorado Springs, CO to Wash, D.C.	Y	Y	N	N/A
United States Telecom Association	October 12 - 13	Dallas to Las Vegas to Dallas	Y	Y	N	N/A
American Diabetes Association	Nov 14 - 16	DFW to Nashville, TN to DFW	Y	Y	N	N/A
American Gas Association	April 23 - 24	DFW to Austin to DFW	Y	N	N	N/A

MILAN
GALLERY

408 Houston Street
Fort Worth TX 76102
(817) 338-4278

INVOICE

IEEE Power Engineering Society
Attn: Al Dimberger
PO Box 970
Fort Worth TX 76101

August 1, 2003

	Item Purchased	Price	Amount Due
1	Texas Ranger Bust	500.00	500.00
	Limited Edition Bronze by Covelle Jones		
Sales Tax			n.a.
		Total Due:	500.00

Texas Ranger Law Enforcement Association names Covelle Jones its official artist

Local sculptor Covelle Jones, professionally known as Covelle, was recently named the Official Artist for the Texas Ranger Law Enforcement Association.

In addition, Covelle was commissioned to create a bronze of "Walker Texas Ranger" actor Chuck Norris, who is also a board member of the association. The bronze will be a limited edition and offered as a fund-raising project.

Covelle is an avid historian and researches each of his subjects to great lengths. He finishes his works with painstaking detail.

"When future generations look at one of my pieces, I want them to see how it really was," said Covelle, who has been compared to the the greatness of Frederick Remington in sensitivity and affinity for the Old West. Covelle believes, "You've got to make them breathe."

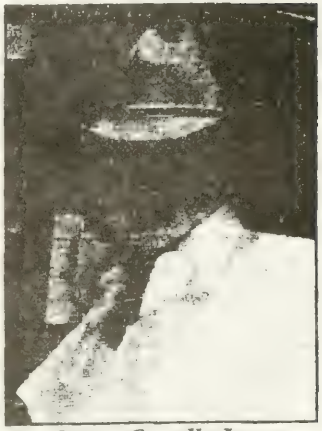
During his 25 years as a professional sculptor, Covelle has earned numerous awards and honors, including a lifetime membership in the NFL Hall of Fame and the West Texas Chamber of Commerce's Cultural Achievement Award. He was the first sculptor to be named Texas State Artist by the Texas Legislature in 1984.

Sculptor finishes his works with painstaking detail

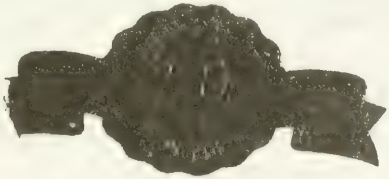
Covelle's sculptures are in the collections of the Alamo; the White House; the Opryland Hotel; Lasso's; mayor Nagazawa of Toyoma, Japan; Mayor General Oleg Kalugin KGB-USSR; and of public figures George Kennedy, Dale Hansen, Danny White, former speaker of the house Gib Lewis, former governor Bill Clements, the late Frank Sinatra and many more.

In appreciation of the grace he has received in his life, Covelle supports state and local community projects by contributing his time and work to raise needed funds and continues to pass his knowledge and experience to many students and apprentices. Covelle believes as with a bronze, "a legacy is forever."

An exhibition of works by Covelle opens Friday, July 3 and runs through the month of July in the Gordon House at Tarleton's Langdon Center, 308 East Pearl St. The artist will be on hand from 10 a.m. to 5 p.m. on Friday; from after the parade until 5 p.m. on Saturday; and Sunday from noon to 5 p.m.



Sculptor Covelle Jones



UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2002

FORM A
For use by Members, officers, and employees

Page 1 of 6

HAND DELIVERED

2004 MAY 19 PM 4:46
(Office Use Only)

Charles F. Bass
(Full Name)

PO Box 210 Peterborough, NH 03458
(Mailing Address)

202-225-5206
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: NH District: 2	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles F. Bass	May 15, 2004

SCHEDULE I - EARNED INCOME

Name Charles F. Bass

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
High Standard, Inc.	Spouse Salary	NA
Columbia Architectural Products	Spouse Salary	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Charles F. Bass

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	1629 21st Street, NW, Washington, DC	$500,001 - $1,000,000	RENT	$15,001 - $50,000	
	1765 R Street, NW, Washington, DC	$500,001 - $1,000,000	RENT	$15,001 - $50,000	
	AG Edwards cash account	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	AG Edwards Professional Fund Advisor (this is a non self-directed fund consisting of mutual funds)	$250,001 - $500,000	DIVIDENDS, INTEREST	$2,501 - $5,000	P
	Columbia Architectural Products stock	$100,001 - $250,000		NONE	
SP	Granite Bank Checking Account	$1,001 - $15,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Charles F. Bass

	Granite Bank Checking Account	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Granite Bank Checking Acct.	$1,001 - $15,000	INTEREST	$1 - $200	
	Granite Bank Money Market Acct.	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	Granite Bank Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Granite Bank Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Growth Fund of America	$1,001 - $15,000		NONE	S
DC	Growth Fund of America	$1,001 - $15,000		NONE	S
	Growth Fund of America	$15,001 - $50,000		NONE	S
	High Standard, Inc. Term Loan	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Investment Company of America	$15,001 - $50,000		NONE	S
SP	IRA AG Edwards, PO Box 353, Greenfield, MA	$15,001 - $50,000		NONE	
	IRA, AG Edwards, PO Box 353, Greenfield, MA	$100,001 - $250,000		NONE	
SP	ITT Hartford Annuity	$50,001 - $100,000		NONE	
	Lancaster National Bank Stock	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Charles F. Bass

JT	Milford Recap Partnership	$1,001 - $15,000		NONE	
	Real Estate, Edgartown, MA	$100,001 - $250,000		NONE	
	Sturm Ruger, Inc. Stock	$15,001 - $50,000		$1,001 - $2,500	S
	Wright Patman Federal Credit Union	$1,001 - $15,000		NONE	

SCHEDULE IV - TRANSACTIONS

Name Charles F. Bass

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	AG Edwards Professional Fund Advisor (this is a non self-directed fund consisting of mutual funds)	P	05-03/12-03	$100,001 - $250,000
	Sturm Ruger, Inc. Stock	S	06-03	$15,001 - $50,000
	Investment Company of America	S	12-03	$15,001 - $50,000
	Growth Fund of America	S	12-03	$15,001 - $50,000
DC	Growth Fund of America	S	12-03	$1,001 - $15,000
DC	Growth Fund of America	S	12-03	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Charles F. Bass

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Citicorp Mortgage Company	Mortgage, 1629 21st Street, NW, Washington, DC	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Charles F. Bass

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Independent Bakers Assn.	Feb. 2-4	MHT- West Palm Beach-MHT	Y	Y	Y	N/A
NCTA	June 8-9	MHT-Chicago-MHT	Y	Y	N	N/A
Ford Motor Company	June 13-14	Dulles-Detroit-MHT	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 11 PM 4:19 (10)
U.S. HOUSE OF REPRESENTATIVES MC
(Office Use Only)

Robert L Beauprez
(Full Name)

6329 Deframe Wy
(Mailing Address)

303.386.3900
Daytime Telephone

Arvada, Co 80004

Filer Status	☒ Member of the U.S. House of Representatives	State: COLORADO District: 7	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert L Beauprez	5/10/04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keane State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Brocktock Development	Commissions per prior agreement 1991	44,593
	Heritage Bank	Bonus & Salary from 2002 job, pd. in Jan. '03	87,248
	Heritage Bank	Spouse Salary	N/A
	Heritage Bank	Spouse Director fees	N/A

Name Robert Beauprez | Page 3 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; C $1,001 – $15,000; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000)	Block C: Type of Income (DIVIDENDS; INTEREST; EXCEPTED TRUST; Other Type of Income (Specify, For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; III $201 – $1,000; V $2,501 – $5,000; VII $15,001 – $50,000; IX $100,001 – $1,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT (Examples)	SP Mega Corp. Stock	X	X		P
	Simon & Schuster	Indefinite	Royalties	X	
	1st Bank of Paducah, KY accounts		X		
JT	Heritage Bank, Co., accounts	X	X		
	Beauprez Ltd. Partnership (Real estate dev., Lafayette, Co) 26.4% ownership	X	Partnership Inc.	X	
	Indian Peaks, Inc. (Real estate dev., Lafayette, Co) 50% ownership	X	X	X	
DC	Heritage Bank, Co., accounts	X	X		

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert Beauprez

Page 4 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $3,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Am. Century Funds - Equity Inc.		→					X			Value 7,754							P, S
JT	Front Range Capital Corp. Stock					→					Book Value 2,844,456							P
	(Bank stock, Louisville, Co.)																	
JT	Rental - 595 Beauprez Ave				X										X			
	Lafayette, Co.																	
JT	Rental - 104 Starline Ave																	
	Lafayette, Co																	
JT	Rental - 382 Blackhawk Ln.					→					Asset Value 1,326,200							
	Lafayette, Co.																	
JT	Janus Balanced Fund	X											X					S
	IRA - FRONT RANGE CAP. CORP stock					→					Book Value 1,530,291	X						
	(Bank stock, Louisville, Co)																	
	Self-directed																	
	IRA - Growth Fund America		X					X										P
	IRA - New Perspective Fund	X										X						E
	401k - Fidelity Balanced Fd.			→							value 60,721	X						P
	401k - Tcw Galileo Value Opp Fd.										value 26,116	X						
	401k. Brandywine Fund		→								value 3,955	X						
SP	IRA - Front Range Cap. Corp Stock										Book Value 39,532	X						
	(Bank stock, Louisville, Co)																	
	Self-directed																	
SP	IRA - Growth Fund America		X					X										P

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert Beaupre

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	IRA - New Perspective Fund	X										X						E
SP	401K - Fidelity Balanced Fund		X									X						P
SP	401K Vanguard 500 Index Fd	X											X					E
DC	Heritage Bank, CO., accounts		X						X									
DC	Am. Century Funds - Equity Inc							X					X					P
	(explanation from prev. year																	
	(401K - Vanguard Explorer Fd,																	
	Vanguard 500 Index Fd,																	
	Janus Fund +																	
	MSF Trust Mid Cap Fd																	
	were exchanged to:																	
	Fidelity Balanced Fund)																	
SP	(401K - Vanguard 500 Index																	
	Fd was exchanged to																	
	Fidelity Balanced Fd)																	
JT	(Janus Special Situations Fd,																	
	Janus Strategic Value Fd,																	
	+ Janus Orion Fd were																	
	exchanged to																	
	Janus Balanced Fund)																	
DC	(Janus Fund, Orion Fund,																	
	and Special Situations Fd																	
	transferred to Janus Balanced Fund)																	

Name Robert Beauprez | Page 6 of 10

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction		Date	Amount of Transaction									
			SALE	(MO/DAY/YR)		C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
SP	Example: Mega Corporation Common Stock			10-12-03		X								
JT	American Century Funds - Equity Income	X		14 investments 6/5-12/31/03										
JT	American Century Funds - Equity Income		X	11-13-03	X									
JT	Front Range Capital Corp. Stock			9-15-03			X							
JT	Janus Balanced Fund		X	4-30-03		X								
JT	Janus Special Situations Fund		X	4-17-03	X									
JT	Janus Orion Fund		X	4-17-03	X									
JT	Janus Strategic Value Fund		X	4-17-03	X									
	IRA - Growth Fund America	X		8-28-03	X									
	IRA - New Perspective Fund		X	8-28-03	X									
SP	IRA - Growth Fund America	X		8-28-03	X									
SP	IRA - New Perspective Fund		X	8-28-03	X									
DC	American Century Funds - Equity Income	X		13 investments 5/8-12/31/03		X								
DC	Janus Fund		X	4-17-03	X									
DC	Janus Orion Fund		X	4-17-03	X									
DC	Janus Special Situations Fund		X	4-17-03	X									
DC	Janus Balanced Fund	X		2 sales on 4/30 + 5/20	X									

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SCHEDULE IV — TRANSACTIONS

Name Robert Beauprez

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10-12-03	X				
	401k - Vanguard Explorer Fund	X	4-16-03	X				
	401k - Vanguard 500 Index Fund	X	4-16-03	X				
	401k - Janus Fund	X	4-16-03	X				
	401k - MSIF Trust Mid Cap Fund	X	4-16-03	X				
	401k - Fidelity Balanced Fund	X	4-16-03		X			
SP	401k - Vanguard 500 Index	X	4-17-03	X				
SP	401k - Fidelity Balanced Fund	X	4-17-03	X				

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Name Robert Beauprez | Page 8 of 10

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001 – $50,000	E $100,001 – $250,000	G $500,001 – $1,000,000	I $5,000,001 – $25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	Lehman Bros. Bank, Denver, Co. (Aurora Loan Services)	Mortgage on rental @ 382 Blackhawk Ln, Lafayette					
JT	Wachovia Bank, Delaware, N.A.	Home Equity Line of Credit Rental at 382 Blackhawk Ln.					
JT	Lehman Bros. Bank, Denver, Co (Aurora Loan Services)	Mortgage on rental 595 Beauprez Av, Lafayette, CO					
JT	Lehman Bros Bank, Denver, Co (Aurora Loan Services)	Mortgage on rental 104 Starline Av, Lafayette, Co.		X			
JT	Bankers Bank of the West	Personal Loans		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Simon Wiesenthal Center, LA	May 10-13	Wash, D.C - Paris - Wash, D.C	Y	Y	N	N

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Indian Peaks, Inc.
Partner	Beauprez, Ltd.
Member	Heritage Place Development, LLC (LLC is disolved at year end)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

Robert Christopher Bell
(Full Name)

4103 Underwood St Houston, TX 77025
(Mailing Address)

713-978-7701
Daytime Telephone

Filer Status: ☑ Member of the U.S. House of Representatives — State: TX — District: 25

☐ Officer Or Employee — Employing Office: Chris Bell - TX25

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Chr Bell	5/17/2004

SCHEDULE I - EARNED INCOME

Name Robert Christopher Bell

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Construction Workforce Coalition	Spouse Salary	$30,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert Christopher Bell

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
AIM Money Market	$1,001 - $15,000	Interest	$1 - $200	
Davis NY Venture Fund	$1,001 - $15,000	Cap Gains/Div	$201 - $1,000	
SEI 0 IDX S&P 500	None	Cap Gains/Div	NONE	

SCHEDULE V - LIABILITIES

Name Robert Christopher Bell

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Beirne Maynard Parsons, LLP	Promisory Note	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Robert Christopher Bell

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Islamic Free Market Institute Foundation, Univ. Of Qatar	Apr. 12-15	Houston, TX-- Doha, Qatar--Mumbai, India, New Delhi, India - Houston, TX	Y	Y	N	N/A
Confederation of Indian Industry	Apr. 15-18	Mumbai, India--New Delhi, India	Y	Y	N	N/A
Amer. Israel Educ. Foundation	Aug. 2-10	Wash., DC-- Tel Aviv, Israel--Wash. DC	Y	Y	N	N/A
Planned Parenthood Global Partners & Planned Parentood-Houston	Dec. 3-5	Houston, TX-- Mex. DF--Houston, TX	Y	Y	N	N/A

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Douglas Kent Bereuter
(Full Name)

2184 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-4806
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: NE District: 1st ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Doug Bereuter	5/4/04

SCHEDULE I - EARNED INCOME

Name Douglas Kent Bereuter

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Arlington County, Virginia School Board	Spouse Pension	NA
Commonwealth of Virginia	Spouse Pension	NA

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Douglas Kent Bereuter

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Center for Strategic and International Studies (CSIS)	Article	Nov. 13, 2003	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Douglas Kent Bereuter

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Savings Account Calvert Group, Kansas City, MO	$1,001 - $15,000	INTEREST	$201 - $1,000	
	IRA Account, USAA, San Antonio, Texas	$15,001 - $50,000	INTEREST	NONE	
SP	IRA Account, USAA, San Antonio, Texas	$15,001 - $50,000	INTEREST	NONE	
JT	Checking Account, BB&T, Falls Church, VA	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Checking Account, Cornhusker Bank, Lincoln, NE	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Douglas Kent Bereuter

	Approximately one-quarter shareholder in family corp. Owning 38 acres of land and residence in unincorporated Summit County, CO and a parcel with storage building in Utica, NE	$100,001 - $250,000	NONE	NONE	
SP	403(B)(7) Account, USAA San Antonio, Texas	$50,001 - $100,000	NONE	NONE	
JT	Congressional Federal Credit Union, Washington, DC	$1 - $1,000	INTEREST	$1 - $200	

SCHEDULE VI - GIFTS

Name Douglas Kent Bereuter

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Royal Embassy of Denmark, Holiday Party, Mrs. Douglas (Louise) Bereuter won a ~~raffle~~ (drawing) DB	Round trip economy fare on SAS from Washington, DC -- Copenhagen, Denmark	$299

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Douglas Kent Bereuter

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute	Jan. 17-24	Wash., DC -- Lanai, HI -- Wash , DC	Y	Y	Y	No
Aspen Institute	June 27-July 3	Wash., DC -- Helsinki, Finland -- Wash., DC	Y	Y	Y	No

SCHEDULE VIII - POSITIONS

Name Douglas Kent Bereuter

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Friends of the U.S. National Arboretum, Washington, DC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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MC

(Office Use Only)

Shelley Berkley
(Full Name)

9709 Camden Hills Ave
(Mailing Address)

202 225-5965
Daytime Telephone

Las Vegas, NV 89145

Filer Status	[XX] Member of the U.S. House of Representatives	State: NV District: 01	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Shelley Berkley	5-13-04

Name: Shelley Berkley | Page 2 of 31

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Nephrology and Endocrine Associates	Spouse Salary	NA
Amgen	Spouse Consulting	NA
Wyeth Pharm	Spouse Consulting	NA
EURO RBCG Life	Spouse Consulting	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Shelley Berkley

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or income Source	Block B: Value of Asset (A None; C $1,001 – $15,000; D; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000)	Block C: Type of Income (DIVIDENDS; INTEREST; EXCEPTED TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; III $201 – $1,000; V $2,501 – $5,000; VII $15,001 – $50,000; IX $100,001 – $1,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT (Examples)	SP Mega Corp. Stock	X	X	X	P
	Simon & Schuster	Indefinite	Royalties		
	1st Bank of Paducah, KY accounts		X		
SP	BankWest Las Vegas NV		X		
SP	BusinessBank Las Vegas		X		
SP	Pentagon Fed Credit Union		X		
	Pentagon Fed Credit Union		X		
	Congressional Fed Credit Union	X	X		
	Nevada State Bank			X	Inheritance

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Shelley Berkley

Page 4 of 54

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Morgan Stanely Dean Witter																	
	IRA account- for year end																	
	value, income and detailed																	
tran	sactions see attachment																	
SP	Professional Facilities, INC			X				X										
	medical office building																	
McD	aniel St, North Las Vegas																	
	4133 N. Torrey Pines LV NV																	
SP	Quail Park V										rtnership							
offic	e complex																	
	Rancho and Alta																	
	Las Vegas NV																	
	500 S. Rancho LV NV																	
SP	The Gin Mill			X						P	nership	X						P
	Tavern																	
	2561 Windmill																	
	Henderson NV 89014																	
SP	Metalast International		X							P	nership	X						
	anodizing aluminum																	
	2241 Park Place Minden NV																	

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Shelley Berkley

Page 5 of 21

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	RRT, LLC					X					rtnership					X		
	provides dialysis services																	
	Summerlin area of																	
	Las Vegas, NV																	
SP	Nephrology and Endocrine										salary							
	Associates- medical																	
	practice Las Vegas, NV																	
SP	Salomon Smith Barney																	
	for year end value, income																	
	and detailed transactions																	
	see attachment (2 accounts)																	
SP	Charles Schwab Trust One																	
	Account for year end value																	
	income and detailed																	
	transactions see attachment																	
SP	Charles Schwab IRA																	
	for year end value, income																	
	and detailed transactions see	attachment																

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Shelley Berkley

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Nephrology & Endocrine																	
Associates 401(K) Plan																		
	held by Putman Investments																	
	for year end values, income																	
	and detailed transactions																	
	see attachment																	
Morgan Stanley Dean Witter																		
	IRA Account- for year end																	
	value, income and detailed																	
transactions see attachement																		
	Morgan Stanley Dean Witter																	
	Roth IRA- for year end																	
value, income and detailed																		
	transactions see attachment																	
SP	ITT Industries		X					X				X						P< 1000
SP	EnviroSystems		X									X						
SP	Las Vegas Business Bank		X									X						
SP	IBM		X					X				X						P< 1000
SP	Pfizer							X					X					P< 1000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Shelley Berkley

Page 7 of 24

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	3466 Legendary LV NV			X														
SP	Morgan Stanley Dean Witter																	
	Active Assets Account																	
	for year end value, income																	
	and detailed transactions																	
	see attachment																	
JT	150 D St SE Washington DC																	
SP	SHDC, LLC										partnership	X						P
	Dialysis services																	
	Southern Hills Area of																	
	Las Vegas, NV																	

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Name Shelley Berkley

Page 8 of 24

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10–12–00	X				
SP	The Gin Mill		8 Oct 03	X				
SP	SHDC, LLC		29 Oct 03	X				
	See Attachments							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	Central National Bank	Mortgage on 3466 Legendary LV NV	X				
JT	Pentagon Federal Credit Union	Mortgage on 150 D St SE DC			X		

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Name Shelley Berkley | Page 6 of 54

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Chinese Intertional Economic	15 Jan-	LV-Taiwan- LV	Y	Y	Y	N
Cooperation Association	20 Jan 03					
United Hellenic American	26 May-	LV-Greece-DC	Y	Y	Y	N
Congress	2 Jun 03					
American Israel Education	2 Aug-	LV- Israel- LV	Y	Y	Y	N
Foundation	10 Aug 03					

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Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

IRA Rollover
Dated 06/11/97
Householding Anniv. Date:
11/05/2002

ROCHELLE L BERKLEY
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145-8610

137

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Asset
Money Market Funds	$39.51	0.0%
Stocks	1,799.00	3.5
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	50,241.10	96.5
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$52,079.61	100.0%
Cash	0.00	
Total Asset Value	$52,079.61	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$0.00	$0.00
Stocks	0.00	0.00
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$0.00	$0.00

Activity Summary

Total Asset Value October 31 2003		$50,080.45
Cash/Money Market Activity		
Closing Balance 10/31	$39.51	
Credits To Your Account		
Dividends and Interest	0.00	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	0.00	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	0.00	
Total Debits	0.00	
Closing Balance 12/31	39.51	
Net Change Cash/Money Market Activity		0.00
Changes in Asset Value		
Value of Priced Assets 10/31	$50,040.94	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	1,999.16	
Value of Priced Assets 12/31	52,040.10	
Net Change in Asset Value		1,999.16
Total Asset Value as of December 31 2003		$52,079.61

Please see page 4 for your Account's Retirement Recap.

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

ROCHELLE L BERKLEY
9708 CAMDEN HILLS AVE

ASSET DETAILS

Cash and Money Market Funds

	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
LIQUID ASSET FUND	39.51		0
Total Cash and Money Market Funds	39.51		0
Net Change Since Last Statement	0.00		

Annualized 30 Day Yields

Liquid Asset Fund	0.54%
U. S. Gov't Money Market Tr	0.40%

Stocks

	Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks							
100 TIME WARNER INC NEW	17.99	1,799.00	3.5%	0	0.00%	TWX	
Total Stocks		$1,799.00	3.5%	0	0.00%		
Net Change Since Last Statement		$270.00					

Mutual Funds

	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Morgan Stanley Mutual Funds								
653.761 INFORMATION FUND B	9.6100	6,282.84	12.1%	N/A	N/A	141101498	IFOBX	Reinv/Reinv
1,544.429 GLOBAL ADVANTAGE FUND B	7.3100	11,289.78	21.7%	N/A	N/A	125763565	GADBX	Reinv/Reinv

Investments and services are offered thr n Morgan Stanley DW Inc. member SIPC

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

ROCHELLE L BERKLEY
9708 CAMDEN HILLS AVE

Account Number

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Morgan Stanley Mutual Funds								
591.416 DEVELOPING GRW SECURITIES B	17.3400	10,255.15	19.7%	N/A	N/A	140844269	DGRBX	Reinv/Reinv
Total Morgan Stanley Mutual Funds		27,827.77	53.8%	N/A	N/A			
Other Mutual Funds								
634.195 PHOENIX-ENGEMANN NIFTY FIFTY A	17.3100	10,977.92	21.1%	N/A	N/A		PANFX	Reinv/Reinv
417.503 PHOENIX-ENGEMANN SM MDCP GR A	27.3900	11,435.41	21.9%	N/A	N/A		PAMAX	Reinv/Reinv
Total Other Mutual Funds		22,413.33	43.0%	N/A	N/A			
Total Mutual Funds		[illegible]	[illegible]	N/A	N/A			
Net Change Since Last Statement		[illegible]						

Asset Summary	Value	Est Yrly Income
Total Asset Value	[illegible]	[illegible]
Total Net Change in Fund Value Since Last Statement	[illegible]	

ADDITIONAL ACCOUNT INFORMATION

Morgan Stanley Fund Summary	YTD Dividends	YTD Cap Gains	YTD Taxes	Features
INFORMATION FUND B	0.00	0.00	0.00	Reinvest Dividends and Capital Gains
GLOBAL ADVANTAGE FUND B	0.00	0.00	0.00	Reinvest Dividends and Capital Gains
DEVELOPING GRW SECURITIES B	0.00	0.00	0.00	Reinvest Dividends and Capital Gains
LIQUID ASSET FUND	0.00	0.00	0.00	Reinvest Dividends
[illegible]	[illegible]	[illegible]	[illegible]	

Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

Your Financial Advisor

Account Number

Roth Converted IRA
Dated 12/21/98
Householding Anniv. Date:
11/05/2002

ROCHELLE BERKLEY
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145-8610

137

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Assets
Money Market Funds	$3,506.36	3.0%
Stocks	90,786.20	78.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	22,182.00	19.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$116,474.56	100.0%
Cash	0.00	
Total Asset Value	$116,474.56	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$1.61	$16.74
Stocks	0.00	1,380.00
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$1.61	$1,396.74

Activity Summary

Total Asset Value November 30 2003		$112,982.75
Cash/Money Market Activity for December		
Closing Balance 11/30	$3,504.75	
Credits To Your Account		
Dividends and Interest	1.61	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	1.61	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	0.00	
Total Debits	0.00	
Closing Balance 12/31	3,506.36	
Net Change Cash/Money Market Activity		1.61
Changes in Asset Value for December		
Value of Priced Assets 11/30	$109,478.00	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	3,490.20	
Value of Priced Assets 12/31	112,968.20	
Net Change in Asset Value		3,490.20
Total Asset Value as of December 31 2003		$116,474.56

Please see page 3 for your Account's Retirement Recap.

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Morgan Stanley

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

ROCHELLE BERKLEY
9709 CAMDEN HILLS AVE

Account Number

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
LIQUID ASSET FUND	3,506.36	3.0%	18
Total Cash and Money Market Funds	$3,506.36	3.0%	$18

Net Change Since Last Statement $91.61

Annualized 30 Day Yields

Liquid Asset Fund..... 0.54%
U. S. Gov't Money Market Tr..... 0.40%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
370	AKAMAI TECHNOLOGIES INC	10.76	3,981.20	3.5%	0	0.00%	AKAM	
1,500	MORGAN STANLEY	57.87	86,805.00	74.5%	1,500	1.72%	MWD	Next Dividend Payable 01/04
Total Stocks			$90,786.20	78.0%	$1,500	1.65%		

Net Change Since Last Statement $2,908.20

Certificates of Deposit		Market Price	Market Value	Pct of Assets	Est Yrly Income	Current Yield	Accruing Interest	Additional Information
20,000	BANKERS TR S&P 500 LINK CD IDX ZERO COUPON DUE 01/28/08	110.910	22,182.00	19.0%	0	0.00%	0	ISSUE 01/28/98 FDIC INSURED MATURITY VALUE $20,000.00
Total Certificates of Deposit			$22,182.00	19.0%	$0	0.00%	0	

Net Change Since Last Statement $582.00

Asset Summary	Value	Est Yrly Income
Total Asset Value	$116,474.56	$1,518

Total Net Change In Priced Assets Since Last Statement $3,490.20

Morgan Stanley Roth IRA 2003

Date	Action	Transaction	$ Amount
1/31/2003	Div	Morgan Stanley Dean Witter	345.00
1/31/2003	IntInc		1.50
2/28/2003	IntInc		1.41
4/10/2003	IntInc		1.55
5/1/2003	Div	Morgan Stanley Dean Witter	345.00
5/30/2003	IntInc		1.53
6/30/2003	IntInc		1.47
7/31/2003	Div	Morgan Stanley Dean Witter	345.00
7/31/2003	IntInc		1.23
9/30/2003	IntInc		1.33
10/30/2003	Div	Morgan Stanley Dean Witter	345.00
11/28/2003	IntInc		1.29
11/28/2003	IntInc		2.47
12/31/2003	IntInc		1.61

Member: Shelley Berkley NV-01

Charles SCHWAB

Account Statement
Retain for Your Records

Schwab One® Trust Account
Account Number:

Statement Period: December 1, 2003 to December 31, 2003
Last Statement: November 30, 2003

Account Opened in: 1994
Page 1

Visit our website at: schwab.com
Questions? Call 1-800-435-8804
Press: 1-Quotes, 2-Trading, 3-Account Services, 4-New Accounts, 5-Other Inquiries

LAWRENCE M LEHRNER TTEE
LEHRNER FAMILY LIVING TRUST
U/A DTD 02/22/1996
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145-8610

Account Value Summary	
Cash & Sweep Money Market Funds	$ 127,885.25
Investments	$ 183,081.10
Total Account Value	**$ 310,966.35**

Change In Value Summary	
Change in Value Since November 30, 2003:	$ (14,619.88)
Change in Value Since January 1, 2003	$ 89,247.06

Rate Summary	
Schwab Muni MMF	0.54%

Investment Detail

Description	*Symbol*	*Quantity Long/Short*		*Price*	*Market Value*
Cash and Money Market Funds (Sweep)					
SCH MUNI MONEY FUND	SWXXX	127,885.2500	L	$ 1	$ 127,885.25
Investments					
SCUDDER HIGH YIELD TAX FREE CL S ◊	SHYTX	6,544.5220	L	$ 12.8500	$ 84,097.11
DAVITA INC	DVA	500	L	39	19,500.00
HARTFORD FINL SVCS GRP ◊	HIG	91.0085	L	59.0300	5,372.23
I T T INDUSTRIES INC INDIANA ◊	ITT	19.7234	L	74.2100	1,463.67
INTL BUSINESS MACHINES ◊	IBM	41.4901	L	92.6800	3,845.30
PFIZER INCORPORATED ◊	PFE	634.2828	L	35.3300	22,409.21
DREYFUS S&P 500 INDEX ◊	PEOPX	476.0070	L	32.4300	15,436.91
WILLIAM BLAIR INTL GROWTH FD-CL N ◊	WBIGX	1,659.8750	L	18.6500	30,956.67
	Total Account Value				**$ 310,966.35**

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

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SIPC

Charles SCHWAB

Member: Shelley Berkley NV-01

Form 1099
with Account Summary
Retain for your Records

TAX YEAR 2003

Date Prepared: January 23, 2004

Payer's Name and Address

CHARLES SCHWAB & CO., INC.
101 MONTGOMERY ST.
SAN FRANCISCO, CA 94104

Federal ID Number

Recipient's Name and Address

LAWRENCE M LEHRNER TTEE
LEHRNER FAMILY LIVING TRUST
U/A DTD 02/22/1996
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145

Taxpayer ID Number:
Account Number:

Dividends and Distributions — **Form 1099-DIV**

Department of the Treasury--Internal Revenue Service — Copy B for Recipient (OMB No. 1545-0110)

Box	Description		Amount	Total
1a	Total Ordinary Dividends			$ 755.60
1b	Qualified Dividends			715.92
2a	Total Capital Gain Distributions			0.00
	(Includes Amounts Shown in boxes 2b, 2c, 2d, 2e and 2f)			
	2b Post-May 5 Capital Gain Distributions	$	0.00	
	2c Qualified 5-Year Gain		0.00	
	2d Unrecap. Sec 1250 Gain		0.00	
	2e Section 1202 Gain		0.00	
	2f Collectibles (28%) Gain		0.00	
3	Nontaxable Distributions			0.00
4	**Federal Income Tax Withheld**			**0.00**
5	Investment Expenses			0.00
6	Foreign Tax Paid			7.72
7	Foreign Country or U.S. Possession			N/A
8	Cash Liquidation Distributions			0.00
9	Noncash Liquidation Distributions			0.00

Interest Income 2003 — **Form 1099-INT**

Department of the Treasury--Internal Revenue Service — Copy B for Recipient (OMB No. 1545-0112)

Box	Description		Total
1	Interest Income Not Included in Box 3	$	0.00
2	Early Withdrawal Penalty		0.00
3	Interest on U.S. Savings Bonds and Treasury Obligations		0.00
4	**Federal Income Tax Withheld**		**0.00**
5	Investment Expenses		0.00
6	Foreign Tax Paid		0.00
7	Foreign Country or U.S. Possession		N/A

This is important tax information and is being furnished to the Internal Revenue Service. *If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the I.R.S. determines it has not been reported.* If you should have any questions regarding information being reported on this form please call us at 1-800-435-4000.

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charles SCHWAB

Member: Shelley Berkley NV-01

Form 1099
with Account Summary
Retain for your Records

TAX YEAR 2003

Date Prepared: January 23, 2004

Payer's Name and Address

CHARLES SCHWAB & CO., INC.
101 MONTGOMERY ST.
SAN FRANCISCO, CA 94104

Federal ID Number

Recipient's Name and Address

LAWRENCE M LEHRNER TTEE
LEHRNER FAMILY LIVING TRUST
U/A DTD 02 22 1996
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145

Taxpayer ID Number:
Account Number:

Form 1099-B Proceeds From Broker and Barter Exchange Transactions **Form 1099-B**

Department of the Treasury-Internal Revenue Service

Copy B for Recipient (OMB No. 1545-0715)

1A-Sale Date	**	*1B-Cusip Number*	*Quantity*	*5-Description*	*2-Gross Proceeds (Less Commissions)*	*4-Federal Income Tax Withheld*
02/21/03	S	811170208	750.0000	SCUDDER HIGH YIELD TAX	$ 9,502.50	$ 0.00
06/23/03	S	471023309	695.7370	JANUS WORLDWIDE FUND	24,023.80	0.00
		Total Federal Income Tax Withheld				$ 0.00

** ACTIVITY CODES C = Cash In lieu E = Exchange P = Principal S = Sale T = Tender
CV = Conversion M = Cash Merger R = Redemption SS = Short Sale

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SCHWAB

Member: Shelley Berkley NV-01

Form 1099
with Account Summary
Retain for your Records

TAX YEAR 2003

Date Prepared: January 23, 2004

Taxpayer ID Number:
Account Number:

ACCOUNT SUMMARY

The information in this and all subsequent sections is not being provided to the IRS by Charles Schwab. It is being provided to you as additional tax reporting information that you may need to complete your tax return

DETAIL INFORMATION

Dividends and Distributions

Cusip Number	*Description*	*Paid in 2003*	*Paid/Adjusted in 2004 for 2003*	*Amount*
Ordinary Dividends				
093001402	WILLIAM BLAIR INTL	$ 0.00	$ 0.60	$ 0.60
Total Dividends (Included in Box 1a)		**$ 0.00**	**$ 0.60**	**$ 0.60**
Short Term Capital Gains				
811170208	SCUDDER HIGH YIELD TAX	$ 39.08	$ 0.00	$ 39.08
Total Short Term Capital Gains (Included in Box 1a)		**$ 39.08**	**$ 0.00**	**$ 39.08**
Qualified Dividends				
093001402	WILLIAM BLAIR INTL	$ 34.29	$ 7.12	$ 41.41
26200Q105	DREYFUS S&P 500 INDEX	162.98	0.00	162.98
416515104	HARTFORD FINL SVCS GRP	96.93	0.00	96.93
450911102	I T T INDUSTRIES INC	12.35	0.00	12.35
459200101	INTL BUSINESS MACHINES	26.02	0.00	26.02
717081103	PFIZER INCORPORATED	376.23	0.00	376.23
Total Qualified Dividends (Box 1b and included in Box 1a)		**$ 708.80**	**$ 7.12**	**$ 715.92**
Total Ordinary Dividends (Box 1a) (Ordinary Dividends, Short Term Capital Gains and Qualified Dividends)		**$ 747.88**	**$ 7.72**	**$ 755.60**

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Charles SCHWAB

Member: Shelley Berkley NV-01

Form 1099
with Account Summary
Retain for your Records

TAX YEAR 2003

Date Prepared: January 23, 2004

Taxpayer ID Number:
Account Number:

ACCOUNT SUMMARY (CONTINUED)

SUPPLEMENTAL INFORMATION

Dividends Detail

Cusip Number	Description	Paid in 2003	Paid/Adjusted in 2004 for 2003	Amount
808515308	SCH MUNI MONEY FUND	$ 493.14	$ 0.00	$ 493.14
811170208	SCUDDER HIGH YIELD TAX	4,372.53	0.00	4,372.53
Total Tax-Exempt Dividends		**$ 4,865.67**	**$ 0.00**	**$ 4,865.67**

Investment Activity for 2003 - Stocks

Activity	Quantity	Security Description	Trade Date	Settle Date	Price	Net Amount
REINVEST	0.5066	HARTFORD FINL SVCS GRP	01/03/03		47.3900	$ (24.01)
REINVEST	0.6502	HARTFORD FINL SVCS GRP	04/02/03		37.1439	(24.15)
REINVEST	0.4737	HARTFORD FINL SVCS GRP	07/02/03		51.3400	(24.32)
REINVEST	0.4564	HARTFORD FINL SVCS GRP	10/02/03		53.5747	(24.45)
REINVEST	0.0477	I T T INDUSTRIES INC	01/03/03		61.4100	(2.93)
REINVEST	0.0568	I T T INDUSTRIES INC	04/02/03		55.1000	(3.13)
REINVEST	0.0480	I T T INDUSTRIES INC	07/02/03		65.4600	(3.14)
REINVEST	0.0517	I T T INDUSTRIES INC	10/02/03		60.9000	(3.15)
REINVEST	0.0810	INTL BUSINESS MACHINES	03/11/03		76.2839	(6.18)
REINVEST	0.0797	INTL BUSINESS MACHINES	06/11/03		82.8509	(6.60)
REINVEST	0.0759	INTL BUSINESS MACHINES	09/11/03		87.1146	(6.61)
REINVEST	0.0715	INTL BUSINESS MACHINES	12/11/03		92.7470	(6.63)
REINVEST	3.1821	PFIZER INCORPORATED	02/18/03		29.3456	(93.38)
REINVEST	2.7766	PFIZER INCORPORATED	06/06/03		33.8000	(93.85)
REINVEST	3.0440	PFIZER INCORPORATED	09/05/03		30.9692	(94.27)
REINVEST	2.7626	PFIZER INCORPORATED	12/05/03		34.2907	(94.73)
Total Purchases/Adjustments - Stocks					**$**	**(511.53)**
Total Proceeds/Adjustments - Stocks					**$**	**0.00**

Investment Activity for 2003 - Mutual Funds

Activity	Quantity	Security Description	Trade Date	Settle Date	Price	Net Amount
REINVEST	5.2270	DREYFUS S&P 500 INDEX	12/04/03		31.1800	$ (162.98)
REINVEST	33.2510	SCUDDER HIGH YIELD TAX	01/27/03		12.6500	(420.62)
REINVEST	28.9910	SCUDDER HIGH YIELD TAX	02/24/03		12.6700	(367.32)
REINVEST	27.1100	SCUDDER HIGH YIELD TAX	03/25/03		12.5800	(341.05)
REINVEST	27.8130	SCUDDER HIGH YIELD TAX	04/24/03		12.6500	(351.84)
REINVEST	29.3790	SCUDDER HIGH YIELD TAX	05/23/03		12.8900	(378.69)
REINVEST	26.3350	SCUDDER HIGH YIELD TAX	06/24/03		12.7900	(336.82)

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Charles SCHWAB

Member: Shelley Berkley NV-01

Form 1099
with Account Summary
Retain for your Records

TAX YEAR 2003

Date Prepared: January 23, 2004

Taxpayer ID Number:
Account Number:

ACCOUNT SUMMARY (CONTINUED)

SUPPLEMENTAL INFORMATION (continued)

Investment Activity for 2003 - Mutual Funds (continued)

Activity	Quantity	Security Description	Trade Date	Settle Date	Price	Net Amount
REINVEST	30.2700	SCUDDER HIGH YIELD TAX	07/25/03		12.6000	(381.40)
REINVEST	27.5280	SCUDDER HIGH YIELD TAX	08/25/03		12.4900	(343.83)
REINVEST	29.1170	SCUDDER HIGH YIELD TAX	09/24/03		12.6300	(367.75)
REINVEST	31.6050	SCUDDER HIGH YIELD TAX	10/27/03		12.6700	(400.44)
REINVEST	25.3990	SCUDDER HIGH YIELD TAX	11/21/03		12.8200	(325.61)
REINVEST	3.0560	SCUDDER HIGH YIELD TAX	12/15/03		12.7900	(39.08)
REINVEST	27.7730	SCUDDER HIGH YIELD TAX	12/23/03		12.8600	(357.16)
BUY	1,657.9570	WILLIAM BLAIR INTL	06/24/03	06/25/03	14.4900	(24,023.80)
REINVEST	1.1750	WILLIAM BLAIR INTL	12/16/03		17.8900	(21.02)
REINVEST	1.1750	WILLIAM BLAIR INTL	12/17/03		17.8900	21.02
REINVEST	1.9180	WILLIAM BLAIR INTL	12/18/03		17.8800	(34.29)
Total Purchases/Adjustments - Mutual Funds					**$**	**(28,653.70)**
Total Proceeds/Adjustments - Mutual Funds					**$**	**21.02**

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SMITH BARNEY citigroup

Member: Shelley Berkley NV-01

Prime Broker Statement

December 1 - December 31, 2003

Account number

DR. LAWRENCE LEHRNER, TTEE
THE LEHRNER FAMILY TRUST
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145-8610

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant

Select Service Center:1-800-423-7248
Branch: 800-456-0914

www.smithbarney.com

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Account value	
Cash balance	$ 13,139.06
Money fund	652.90
Stocks - Long	2,020,700.66
Short trading account balance	0.00
Total value this period	$ 2,034,492.62
Total value last period	$ 1,913,695.86

Total value (excluding accrued interest) this period	$ 2,034,492.62
Total value (excluding accrued interest) last period	$ 1,913,695.82

The information on this statement is provided on a trade date basis. Settlement date information is only displayed in the "Settlement date cash balance" section.

Cash, money fund, bank deposits	Cash/margin account	Short account
Opening balance	$ 33,203.91	$ 0.00
Securities bought and other subtractions	(21,898.99)	0.00
Securities sold and other additions	0.00	0.00
Interest credited	16.74	
Dividends credited	2,467.84	
Money fund earnings reinvested	.46	
Closing balance	$ 13,791.96	$ 0.00

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

Earnings summary	This period Taxable	This period Non-taxable	This year Taxable	This year Non-taxable
Interest	$ 16.74	$ 0.00	$ 76.91	$ 0.00
Dividends	2,575.64	0.00	34,538.06	0.00
Money fund earnings	.46	0.00	31.97	0.00
Bank Deposit Program interest	0.00	0.00	30.07	0.00
Total	$ 2,592.84	$ 0.00	$ 34,677.01	$ 0.00

SMITH BARNEY citigroup

Member: Shelley Berkley NV-01

Prime Broker Statement

December 1 - December 31, 2003

Account number

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant

Select Service Center:1-800-423-7248
Branch: 800-456-0914

DR. LAWRENCE LEHRNER, TTEE
THE LEHRNER FAMILY TRUST
9709 CAMDEN HILLS
LAS VEGAS NV 89145-8610

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Account value

Cash balance	$ 16.50
Bank Deposit Program℠-principal	3,163.08
Stocks - Long	217,519.78
Short trading account balance	0.00
Total value this period	**$ 220,699.36**
Total value last period	**$ 205,541.96**

Total value (excluding accrued interest) this period $ 220,699.36
Total value (excluding accrued interest) last period $ 205,541.96

The information on this statement is provided on a trade date basis. Settlement date information is only displayed in the "Settlement date cash balance" section.

Cash, money fund, bank deposits

	Cash/margin account	Short account
Opening balance	$ 2,751.80	$ 0.00
Dividends credited	425.11	
Bank Deposit Program℠ interest reinvested	2.67	
Closing balance	$ 3,179.58	$ 0.00

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

Earnings summary	This period Taxable	This period Non-taxable	This year Taxable	This year Non-taxable
Dividends	$ 438.24	$ 0.00	$ 4,116.47	$ 0.00
Bank Deposit Program interest	2.67	0.00	27.96	0.00
Total	$ 440.91	$ 0.00	$ 4,144.43	$ 0.00

Additional summary information	This period	This year
Return of capital	$ 0.00	$ 69.88
FRGN tax withheld	13.13	312.37

SMITH BARNEY citigroup

Consolidated Copy as of 02/22/04

Prime Broker Statement
Forms 1099 for 2003

H

CITIBANK FSB
Account Number

Payer

CITIGROUP GLOBAL MKTS INC.
388 GREENWICH STREET
NEW YORK, NEW YORK 10013
Attn: Tax Reporting Service Center
Tax ID Number 11-2418191

Your Financial Consultant

DR. LAWRENCE LEHRNER, TTEE
THE LEHRNER FAMILY TRUST
9708 CAMDEN HILLS
LAS VEGAS NV
89145-8810

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1099-INT Interest Income 2003

(OMB No. 1545-0112)

Interest income not included in box 3	Early withdrawal penalty	Interest on US Savings Bonds and Treas. obligations	Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession
$ 27.96						
Box 1	Box 2	Box 3	Box 4	Box 5	Box 6	Box 7

1099-DIV Dividends and Distributions 2003

(OMB No. 1545-0110)

Total ordinary dividends	Qualified dividends	Total capital gain distributions	Post-May 5 capital gain distr.	Qualified 5-year gain	Unrecaptured sec. 1250 gain	Section 1202 gain
$ 4,203.25	$ 4,203.25					
Box 1a	Box 1b	Box 2a	Box 2b	Box 2c	Box 2d	Box 2e

Collectibles (28%) gain	Nontaxable distributions	Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession	Cash liquidation distributions	Non cash liquidation distributions
	$ 69.68			$ 312.37	Various		
Box 2f	Box 3	Box 4	Box 5	Box 6	Box 7	Box 8	Box 9

SMITH BARNEY citigroup

Member Shelley Berkley NV-01

Corrected Copy as of 02/22/04

Prime Broker Statement
2003 Year End Summary

H

CITIBANK FSB
Account Number

2003 YEAR END SUMMARY

Details of 1099 Reported Interest Income 2003

The following details show how we derived your total interest reported on Form 1099-INT. Amounts in Box 1 and Box 3 include any taxable accrued interest received.

Reference number	Description	Interest income not included in box 3 (Box 1)	Early withdrawal penalty (Box 2)	Interest on US Savings Bonds and Treas. obligations (Box 3)	Federal income tax withheld (Box 4)	Investment expenses (Box 5)	Foreign tax paid (Box 6)
130000100	CITIBANK NA BANK DEPOSIT PROGRAM	$ 27.96					
Totals in Boxes 1-6		**$ 27.96**					

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e

The following details show how we derived your total dividends reported on Form 1099-DIV. Amount displayed for dividends include dividend reinvestments, money fund earnings, and accrued dividends received.

Reference number	Description	Total Ordinary Dividends Dividends* (Box 1a)	Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150000100	*** DAIMLERCHRYSLER AG-EUR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 80.56		$ 80.56					
150000200	ALBERTSONS INC DELAWARE	57.00		57.00					
150000300	ALCOA INC	90.00		90.00					
150000400	AMERICAN INTL GROUP INC	11.20		11.20					
150000500	ANADARKO PETROLEUM CORP	33.00		33.00					
150000600	*** ASTRAZENECA PLC SPON ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	40.28		40.28					
150000700	*** AVENTIS SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	40.52		40.52					
150000800	*** AXA S.A.SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	32.41		32.41					

SMITH BARNEY citigroup

Corrected Copy as of 02/22/04

Prime Broker Statement
2003 Year End Summary

H

CITIBANK FSB
Account Number

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e - Continued

Reference number	Description	Total Ordinary Dividends Dividends* (Box 1a)	Total Ordinary Dividends Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150000800	*** BASF AG SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 158.54		$ 158.54					
150001000	*** BT GROUP PLC ADR-USD THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	81.00		81.00					
150001100	*** BANCO SANTANDER CENT HISPANO S ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	157.71		157.71					
150001200	*** BARCLAYS PLC-ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	204.20		204.20					
150001300	BELLSOUTH CORP	166.25		166.25					
150001400	CATERPILLAR INC	106.50		106.50					
150001500	COMERICA INC	99.00		99.00					
150001600	CONOCOPHILLIPS	203.75		203.75					
150001700	DELPHI CORP	49.00		49.00					
150001800	WALT DISNEY CO	36.75		36.75					
150001900	DUKE ENERGY CORP	110.00		110.00					
150002000	ELECTRONIC DATA SYS CORP NEW	60.00		60.00					
150002100	*** ENEL SOCIETA PER AZION ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	307.91		307.91					
150002200	FEDEX CORP	15.00		15.00					
150002300	FIRST DATA CORP	8.00		8.00					
150002400	*** FUJI PHOTO FILM CO ADR NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	24.64		24.64					
150002500	GENERAL ELECTRIC CO	96.00		96.00					
150002600	*** GLAXOSMITHKLINE PLC SP ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	70.41		70.41					

2003 YEAR END SUMMARY

2003 YEAR END SUMMARY

SMITH BARNEY citigroup

Member Shelley Berkley NV-01

Corrected Copy as of 02/22/04

Prime Broker Statement
2003 Year End Summary

H

CITIBANK FSB
Account Number

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e - continued

Reference number	Description	Total Ordinary Dividends: Dividends* (Box 1a)	Total Ordinary Dividends: Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150002700	*** HITACHI LTD-ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 39.55		$ 39.55					
150002800	*** ING GROEP NV SPONS ADR THE AMOUNT REPORTED INCLUDES THE VALUE OF THE FOLLOWING STOCK DISTRIBUTION 09/26/03 4 SHRS @$ 18.6900 THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	186.83		186.83					
150002900	INTEL CORP	14.00		14.00					
150003000	INTERNATIONAL PAPER CO	75.00		75.00					
150003100	JOHNSON & JOHNSON	46.25		46.25					
150003200	LEHMAN BROTHERS HOLDINGS INC	36.00		36.00					
150003300	LOCKHEED MARTIN CORP	43.50		43.50					
150003400	MARSH & MCLENNAN COS INC	88.50		88.50					
150003500	MERCK & CO INC	181.25		181.25					
150003600	*** NATIONAL AUSTRALIA BK LTD SPONSORED ADR -USD-	288.11		288.11					
150003700	NATIONAL CITY CORP	93.76		93.76					
150003800	*** NISSAN MTR LTD SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	78.96		78.96					
150003900	*** NOVARTIS AG ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	36.28		36.28					
150004000	PROCTER & GAMBLE CO	43.26		43.26					
150004100	ROHM & HAAS CO	43.00		43.00					
150004200	*** ROYAL DUTCH PETROLEUM CO NY REG SH PAR N GLDR 1.25 THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	97.44		97.44					
150004300	*** SAN PAOLO-IMI SPA SPON ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	139.50		139.50					

SMITH BARNEY citigroup

Corrected Copy as of 02/22/04

Prime Broker Statement
2003 Year End Summary

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CITIBANK FSB
Account Number

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e - continued

Reference number	Description	Total Ordinary Dividends* (Box 1a)	Short-term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150004400	SARA LEE CORP	$ 65.25		$ 65.25					
150004500	SEARS ROEBUCK & CO	69.00		69.00					
150004600	*** SONY CORP SPON ADR-NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	16.43		16.43					
150004700	*** TELEFONICA S.A. SPON ADR	26.14		26.14					
150004800	*** TOTAL S.A SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	58.46		58.46					
150004900	*** UNILEVER NV NY SHS-NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	100.15		100.15					
Totals		$ 4,203.25		$ 4,203.25					

** The total of these two categories equals the amount reported in Form 1099-DIV, Box 1a.*

Please note:
- *"Dividends" includes both Qualified and non-qualified dividends received.*
- *"Total capital gain distributions" is a total of Pre May 6 capital gain distributions and the amounts reported in Boxes 2b through 2e.*

2003 YEAR END SUMMARY

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Prime Broker Statement
2003 Year End Summary

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CITIBANK FSB
Account Number

Details of 1099 Reported Dividends and Distributions 2003, Boxes 2f - 9 - continued

Reference number	Description	Collectibles (28%) gain (Box 2f)	Nontaxable distributions (Box 3)	Federal income tax withheld (Box 4)	Investment expenses (Box 5)	Foreign tax paid (Box 6)	Foreign country or US possession (Box 7)	Cash liquidation distributions (Box 8)	Non cash liquidation distributions (Box 9)

Details of Investment Activity 2003

This section shows your purchases, sales, dividend reinvestments and certain other activity of securities during the year. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Transaction Description	Transaction	Trade Date	Quantity	Price	Amount
120000200	BANCO SANTANDER CENT HISPANO S ADR	Bought	04/15/03	250	$ 7.421	$ -1,870.33
120000300	BELLSOUTH CORP	Bought	04/15/03	125	22.97	-2,896.26
120000400	DELPHI CORP	Sold	11/21/03	-175	8.296	1,431.59[a]
120000500	FUJI PHOTO FILM CO ADR NEW	Sold	11/21/03	-125	27.619	3,430.96[a]
120000600	GANNETT CO INC	Bought	11/25/03	25	86.427	-2,186.68
120000700	GAP INC DELAWARE	Bought	11/14/03	200	21.758	-4,376.70
120000800	ING GROEP NV SPONS ADR	Cash in lieu	09/26/03			12.02
120000900	ING GROEP NV SPONS ADR	Cash in lieu	09/26/03			-12.02
120001100	LAFARGE SPONS ADR NEW LAFARGE COPPEE	Bought	11/13/03	150	19.079	-2,882.85
120001200	MEDCO HEALTH SOLUTIONS INC	Spinoff	08/20/03	15		
120001300	MEDCO HEALTH SOLUTIONS INC	Cash in lieu	08/27/03			2.02
120001400	MEDCO HEALTH SOLUTIONS INC	Sold	10/29/03	-15	33.189	497.81[a]
120001500	NOMURA HOLDINGS INC ADR	Bought	11/25/03	225	15.822	-3,583.97
120001600	SAN PADLO-IMI SPA SPON ADR	Bought	01/24/03	125	13.575	-1,716.89
120001700	SEARS ROEBUCK & CO	Sold	11/13/03	-75	53.432	3,982.26[a]
120001800	SIEMENS A G SPONS ADR	Bought	06/10/03	75	50.116	3,777.47

2003 YEAR END SUMMARY

SMITH BARNEY citigroup

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Prime Broker Statement
2003 Year End Summary

H

CITIBANK FSB
Account Number

Details of Investment Activity 2003 - continued

Reference number	Transaction Description	Transaction	Trade Date	Quantity	Price	Amount
120001900	TELEFONICA S.A. SPON ADR	Dividend	01/23/03	3		
120002000	TELEFONICA S.A. SPON ADR	Dividend	05/12/03	3		
120002100	TELEFONICA S.A. SPON ADR	Cash in lieu	05/20/03			1.91
120002200	TELEFONICA S.A. SPON ADR	Sold	08/10/03	-75	34.633	2,579.38[a]
120002300	UNILEVER NV NY SHS-NEW	Sold	11/11/03	-50	59.275	2,946.15[a]
Total securities bought and other subtractions						**$ -23,302.18**
Total securities sold and other additions						**$ 14,884.10**

[a] *This amount reported to the IRS on Form 1099-B.*

Details of Deposits and Withdrawals 2003

This section reflects any deposits or withdrawals made to your account during the year.

Deposits

Total

Withdrawals

Reference number	Date	Description	Referral number	Amount	Reference number	Date	Description	Referral number	Amount

2003 YEAR END SUMMARY

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Member Shelley Berkley NV-01

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Prime Broker Statement Forms 1099 for 2003

H

DR. LAWRENCE LEHRNER, TTEE
Account Number

Payer

CITIGROUP GLOBAL MKTS INC.
388 GREENWICH STREET
NEW YORK, NEW YORK 10013
Attn: Tax Reporting Service Center
Tax ID Number 11-2418191

Your Financial Consultant

DR. LAWRENCE LEHRNER, TTEE
THE LEHRNER FAMILY TRUST
9709 CAMDEN HILLS AVE
LAS VEGAS NV
89145-8610

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-INT Interest Income 2003

(OMB No 1545-0112)

Interest income not included in box 3	Early withdrawal penalty	Interest on US Savings Bonds and Treas. obligations	Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession
$ 106.98						
Box 1	Box 2	Box 3	Box 4	Box 5	Box 6	Box 7

1099-DIV Dividends and Distributions 2003

(OMB No 1545-0110)

Total ordinary dividends	Qualified dividends	Total capital gain distributions	Post-May 5 capital gain distr.	Qualified 5-year gain	Unrecaptured sec. 1250 gain	Section 1202 gain
$ 34,976.63	$ 34,944.66					
Box 1a	Box 1b	Box 2a	Box 2b	Box 2c	Box 2d	Box 2e

Collectibles (28%) gain	Nontaxable distributions	Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession	Cash liquidation distributions	Non cash liquidation distributions
	$ 470.14			$ 2,814.85	Various		
Box 2f	Box 3	Box 4	Box 5	Box 6	Box 7	Box 8	Box 9

Prime Broker Statement
2003 Year End Summary

H

DR. LAWRENCE LEHRNER, TTEE

Account Number

Details of 1099 Reported Interest Income 2003

The following details show how we derived your total interest reported on Form 1099-INT. Amounts in Box 1 and Box 3 include any taxable accrued interest received.

Reference number	Description	Interest income not included in box 3 (Box 1)	Early withdrawal penalty (Box 2)	Interest on US Savings Bonds and Treas. obligations (Box 3)	Federal income tax withheld (Box 4)	Investment expenses (Box 5)	Foreign tax paid (Box 6)
130000100	CITIBANK NA BANK DEPOSIT PROGRAM	$ 30.07					
130000200	INTEREST ON CREDIT BALANCE	76.91					
Totals in Boxes 1-6		**$ 106.98**					

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e

The following details show how we derived your total dividends reported on Form 1099-DIV. Amount displayed for dividends include dividend reinvestments, money fund earnings, and accrued dividends received.

Reference number	Description	Total Ordinary Dividends Dividends* (Box 1a)	Total Ordinary Dividends Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150000100	*** DAIMLERCHRYSLER AG-EUR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 765.30		$ 765.30					
150000200	*** UBS AG-CHF THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	509.57		509.57					
150000300	ALCOA INC	690.00		690.00					
150000400	ALLSTATE CORP	607.50		607.50					
150000500	ALLTEL CORP DELAWARE	525.00		525.00					
150000600	AMERICAN INTL GROUP INC	67.20		67.20					
150000700	ANADARKO PETROLEUM CORP	231.00		231.00					
150000800	*** ASTRAZENECA PLC SPON ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	503.47		503.47					
150000900	*** AVENTIS SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	283.63		283.63					

2003 YEAR END SUMMARY

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Member Shelley Berkley NV-01

Prime Broker Statement
2003 Year End Summary

DR. LAWRENCE LEHRNER, TTEE
Account Number

2003 YEAR END SUMMARY

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e *Continued*

Reference number	Description	Total Ordinary Dividends: Dividends* (Box 1a)	Total Ordinary Dividends: Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150001000	*** AXA S.A.SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 280.88		$ 280.88					
150001100	*** BASF AG SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	832.35		832.35					
150001200	*** BT GROUP PLC ADR-USD THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	756.00		756.00					
150001300	BAKER HUGHES INC	425.52		425.52					
150001400	*** BANCO SANTANDER CENT HISPANO S ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	1,034.46		1,034.46					
150001500	*** BARCLAYS PLC-ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	986.97		986.97					
150001600	BAXTER INTL INC	407.40		407.40					
150001700	BELLSOUTH CORP	865.25		865.25					
150001800	C I G N A CORP	231.00		231.00					
150001900	CATERPILLAR INC	852.00		852.00					
150002000	COMERICA INC	445.50		445.50					
150002100	CONOCOPHILLIPS	570.50		570.50					
150002200	DELPHI CORP	560.00		560.00					
150002300	WALT DISNEY CO	304.50		304.50					
150002400	DUKE ENERGY CORP	825.00		825.00					
150002500	*** E ONAG SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	686.81		686.81					
150002600	ELECTRONIC DATA SYS CORP NEW	360.00		360.00					
160002700	*** ENEL SOCIETA PER AZION ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	1,282.95		1,282.95					
150002800	FEDEX CORP	75.00		75.00					
150002900	FIRST DATA CORP	62.00		62.00					

Prime Broker Statement
2003 Year End Summary

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DR. LAWRENCE LEHRNER, TTEE
Account Number

Details of 1099 Reported Dividends and Distributions (Box 1a - 2e) - Continued

Reference number	Description	Total Ordinary Dividends: Dividends* (Box 1a)	Total Ordinary Dividends: Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150004800	*** MITSUBISHI TOKYO FINANCIAL GROUP SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 108.31		$ 108.31					
150004900	*** NATIONAL AUSTRALIA BK LTD SPONSORED ADR -USD-	720.26		720.26					
150005000	NATIONAL CITY CORP	562.50		562.50					
150005100	*** NEWS LTD-ADR-NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	66.66		66.66					
150005200	*** NISSAN MTR LTD SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	536.90		536.90					
150005300	*** NOKIA CORP SPONSORED ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	333.99		333.99					
150005400	*** NOVARTIS AG ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	246.94		246.94					
150005500	PROCTER & GAMBLE CO	302.76		302.76					
150005600	*** RIO TINTO PLC-GBP THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	941.11		941.11					
150005700	ROHM & HAAS CO	451.50		451.50					
150005800	*** ROYAL DUTCH PETROLEUM CO NY REG SH PAR N GLDR 1.25 THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	1,103.72		1,103.72					
150005900	*** SAN PAOLO-IMI SPA SPON ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	505.68		505.68					
150006000	SARA LEE CORP	717.75		717.75					
150006100	SEARS ROEBUCK & CO	368.00		368.00					
150006200	*** SIEMENS A G SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	376.04		376.04					

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Member Shelley Berkley NV-01

Prime Broker Statement
2003 Year End Summary

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DR. LAWRENCE LEHRNER, TTEE

Account Number

Details of 1099 Reportable Dividends and Distributions 2003, Boxes 1a - 2e (continued)

Reference number	Description	Total Ordinary Dividends Dividends* (Box 1a)	Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 5-year gain (Box 2c)	Unrecaptured Sec. 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150003000	*** FUJI PHOTO FILM CO ADR NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	$ 172.46		$ 172.46					
150003100	GENERAL ELECTRIC CO	437.00		437.00					
150003200	*** GLAXOSMITHKLINE PLC SP ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	880.08		880.08					
150003300	*** HSBC HLDG PLC SP ADR NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	1,098.61		1,098.61					
150003400	*** HITACHI LTD-ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	303.28		303.28					
150003500	ILLINOIS TOOL WORKS INC	325.50		325.50					
150003600	*** ING GROEP NV SPONS ADR THE AMOUNT REPORTED INCLUDES THE VALUE OF THE FOLLOWING STOCK DISTRIBUTION 09/26/03 21 SHRS @$ 18.6900 THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	873.55		873.55					
150003700	INTEL CORP	104.00		104.00					
150003800	INTERNATIONAL PAPER CO	675.00		675.00					
150003900	JOHNSON & JOHNSON	370.00		370.00					
150004000	KIMBERLY CLARK CORP	462.00		462.00					
150004100	LEHMAN BROTHERS HOLDINGS INC	276.00		276.00					
150004200	LOCKHEED MARTIN CORP	203.00		203.00					
150004300	LOWES COMPANIES INC	57.75		57.75					
150004400	MARSH & MCLENNAN COS INC	649.00		649.00					
150004500	*** MATSUSHITA ELEC INDL ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	201.59		201.59					
150004600	MERCK & CO INC	326.25		326.25					
150004700	MICROSOFT CORP	192.00		192.00					

2003 YEAR END SUMMARY

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Member Shelley Berkley NV-01

Corrected Copy as of 02/22/04

Prime Broker Statement
2003 Year End Summary

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DR. LAWRENCE LEHRNER, TTEE

Account Number

Details of 1099 Reported Dividends and Distributions 2003, Boxes 1a - 2e - continued

Reference number	Description	Total Ordinary Dividends Dividends* (Box 1a)	Short term capital gain*	Qualified dividends (Box 1b)	Total capital gain distributions (Box 2a)	Post-May 5 capital gain distribution (Box 2b)	Qualified 6-year gain (Box 2c)	Unrecaptured Sec 1250 gain (Box 2d)	Section 1202 gain (Box 2e)
150006300	SB MONEY FUNDS CASH PORT CL A	$ 31.97							
150006400	*** SONY CORP SPON ADR-NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	104.06		104.06					
150006500	SUNTRUST BANKS INC	460.00		460.00					
150006600	*** TELEFONICA S.A. SPON ADR	175.88		175.88					
150006700	*** TOTAL S A SPONS ADR THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	818.42		818.42					
150006800	*** UNILEVER NV NY SHS-NEW THIS AMOUNT INCLUDES TAXES PAID TO A FOREIGN GOVERNMENT	801.12		801.12					
150006900	UNITED TECHNOLOGIES CORP	397.25		397.25					
150007000	WASHINGTON MUTUAL INC	1,226.00		1,225.00					
Totals		**$ 34,976.63**		**$ 34,944.66**					

** The total of these two categories equals the amount reported in Form 1099-DIV, Box 1a.*

Please note:

- *"Dividends" includes both Qualified and non-qualified dividends received.*
- *"Total capital gain distributions" is a total of Pre May 6 capital gain distributions and the amounts reported in Boxes 2b through 2e.*

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Member Shelley Berkley NV-01

Prime Broker Statement
2003 Year End Summary

H

DR. LAWRENCE LEHRNER, TTEE
Account Number

2003 YEAR END SUMMARY

Details of Short Term Gain (Loss) 2003

This section shows your sales of securities during the year. The "Sale Proceeds" column excludes any accrued income you may have received. In addition, although cash in lieu less than $20 is not included on Form 1099-B (if applicable), it is included in this section. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain	Post May 5 Gain or (Loss)
125000300	.135	MEDCO HEALTH SOLUTIONS INC CASH IN LIEU OF .13500 RECORD 08/12/03 PAY 08/19/03	09/24/02	08/27/03	$ 3.64	$ 2.76		$ .88	$ .88
125000600	350	TELECOM ITALIA SPA SP ADR CTSY UBS WARBURG LLC PRIN INCL COMM OF 17.50 AND SEC FEE OF 1.47	09/12/02	06/10/03	31,204.27	27,531.51		3,672.76	3,672.76
125000700	.5	TELEFONICA S.A. SPON ADR CASH IN LIEU OF .50000 RECORD 01/27/03 PAY 03/06/03	09/17/02	03/18/03	13.45	12.83		.62	
125000800	7	TELEFONICA S.A SPON ADR CASH IN LIEU OF .70000 RECORD 03/10/03 PAY 05/12/03	09/17/02	05/20/03	22.39	17.61		4.78	4.78
Total					$ 31,243.75	$ 27,564.71		$ 3,679.04	$ 3,678.42

Details of Long Term Gain (Loss) 2003

This section shows your sales of securities during the year. The "Sale Proceeds" column excludes any accrued income you may have received. In addition, although cash in lieu less than $20 is not included on Form 1099-B (if applicable), it is included in this section. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain	Post May 5 Gain or (Loss)
125000100	2,000	DELPHI CORP CTSY KNIGHT SECURITIES INTL LT PRIN INCL COMM OF 60.00 AND SEC FEE OF 0.78	09/24/02	11/21/03	$ 16,517.42	$ 17,588.00	($ 1,070.58)		($ 1,070.58)
125000200	875	FUJI PHOTO FILM CO ADR NEW CTSY JEFFERIES INTL LTD PRIN INCL COMM OF 43.75 AND SEC FEE OF 1.14	09/17/02	11/21/03	24,108.74	26,852.91	(2,746.17)		(2,746.17)
125000400	27	MEDCO HEALTH SOLUTIONS INC	09/24/02	10/03/03	703.29	551.98		151.31	151.31

2003 YEAR END SUMMARY

SMITH BARNEY citigroup

Member Shelley Berkley NV-01

Prime Broker Statement
2003 Year End Summary

Corrected Copy as of 02/22/04

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DR. LAWRENCE LEHRNER, TTEE
Account Number

Details of Long Term Gain (Loss) 2003 - *continued*

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain	Post May 5 Gain or (Loss)
125000500	400	SEARS ROEBUCK & CO	09/05/02	11/13/03	$ 21,347.03	$ 18,062.80		$ 3,284.23	$ 3,284.23
125000900	400	UNILEVER NV NY SHS-NEW CTSY MORGAN STANLEY & CO. INC PRIN INCL COMM OF 20.00 AND SEC FEE OF 1.11	09/19/02	11/11/03	23,674.21	23,000.08		674.13	674.13
Total					$ 86,348.69	$ 86,066.77	($ 3,816.75)	$ 4,109.67	$ 292.92

Morgan Stanley

LAWRENCE M LEHRNER TTEE
FOR THE LEHRNER FAMILY LIVING

SUMMARY OF ACCOUNTS
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

Account	Name	Type	Cash and Money Market	Value of Priced Assets	Total Assets	Pages
	LAWRENCE M LEHRNER TTEE FOR THE LEHRNER FAMILY LIVING	AAA	$607.72	$16,803.28	$17,411.00	3-6
	LARRY LEHRNER	IRA	$9,000.80	$213,437.18	$222,437.98	7-16
	Total		$9,608.52	$230,240.46	$239,848.98	

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

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ACTIVE ASSETS ACCOUNT ®
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

LAWRENCE M LEHRNER TTEE
FOR THE LEHRNER FAMILY LIVING

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
ACTIVE ASSETS MONEY TRUST	607.72	3.4%	4
Total Cash and Money Market Funds	$607.72	3.4%	$4
Net Change Since Last Statement	$.35		

Annualized 30 Day Yields

Active Assets Money Trust..... 0.68%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
151	STANDARD & POORS DEP RECPTS	111.28	16,803.28	96.6%	311	1.85%	SPY	Next Dividend Payable 01/30/04
Total Stocks			$16,803.28	96.6%	$311	1.85%		
Net Change Since Last Statement			$729.33					

Asset Summary	Value	Est Yrly Income
Total Asset Value	$17,411.00	$315
Total Net Change In Priced Assets Since Last Statement	$729.33	

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

Your Financial Advisor

CHOICE RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

IRA Rollover
Dated 01/27/98
Householding Anniv Date:
10/26/2002

LARRY LEHRNER
9709 CAMDEN HILLS AVENUE
LAS VEGAS NV 89145-8610

Access Your Account at
www.morganstanley.com/online

Asset Summary

	Value	% of Assets
Money Market Funds	$9,000.80	4.0%
Stocks	83,224.22	37.7
Municipal Bonds	0.00	0.0
Corporate Fixed Income	72,211.49	32.3
Government Securities	11,000.00	4.9
Mutual Funds	26,734.96	12.0
Unit Investment Trusts	20,266.60	9.1
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$222,437.98	100.0%
Cash	0.00	
Total Asset Value	$222,437.98	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$4.20	$60.55
Stocks	10.91	214.71
Municipal Bonds	0.00	0.00
Corporate Fixed Income	762.50	4,045.64
Government Securities	0.00	1,436.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	535.74
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$776.71	$6,292.64

Activity Summary

Total Asset Value November 30 2003		$214,327.42
Cash/Money Market Activity for December		
Closing Balance 11/30	$8,223.44	
Credits To Your Account		
Dividends and Interest	776.71	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	339.89	
Total Credits	1,116.60	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	-339.24	
Other Debits	0.00	
Total Debits	-339.24	
Closing Balance 12/31	9,000.80	
Net Change Cash/Money Market Activity		777.36
Changes in Asset Value for December		
Value of Priced Assets 11/30	$206,103.98	
Securities Bought	339.24	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	6,994.06	
Value of Priced Assets 12/31	213,437.18	
Net Change in Asset Value		7,333.30
Total Asset Value as of December 31 2003		$222,437.98

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CHOICE RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

LARRY LEHRNER
9709 CAMDEN HILLS AVENUE

Account Number

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
LIQUID ASSET FUND	9,000.80	4.0%	48
Total Cash and Money Market Funds	$9,000.80	4.0%	$48
Net Change Since Last Statement	$777.36		

Annualized 30 Day Yields

Liquid Asset Fund	0.54%
U.S. Gov't Money Market Tr	0.40%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
154	AMERICAN INTERNATIONAL GP	66.28	10,207.12	4.6%	40	.39%	AIG	Next Dividend Payable 04/04
200	AMPHENOL CORP NEW CL A	63.93	12,786.00	5.8%	0	0.00%	APH	
1,600	MORGAN STANLEY MSC NDX/100 INDEX	10.65	17,040.00	7.7%	0	0.00%	MNDX	
2,560	MORGAN STANLEY/BRIDGES 10 COMPANIES DUE 03/26/09	9.26	23,705.6[illegible]	10.7%	0	0.00%	TPA	
250	NORTHPOINT COMM GRP INC	.00	.15	0.1%	0	0.00%	NPNTQ	
125	STANDARD & POORS DEP RECPTS	111.28	13,910.00	6.3%	257	1.85%	SPY	Next Dividend Payable 01/30/04
155	STAPWOOD RTLS & RSDS WW INC	35.97	5,575.35	2.5%	130	2.33%	HOT	Next Dividend Payable 01/21/04
Total Stocks			$83,224.22	37.7%	$427	.51%		
Net Change Since Last Statement			$3,892.17					

Corporate Fixed Income		Current Price	Value	Pct of Assets	Est Yrly Income	Current Yield	Accruing Interest	Additional Information
Corporate Bonds								
16,000	MORGAN STANLEY/INTEL SPN DUE 12/30/10 ZERO COUPON DUE 12/30/10	101.500	16,240.00	7.3%	0	0.00%	0	MOODY AA2 ISSUE 05/28/03
10,000	HOUSEHOLD FINANCE CORP 7.500% MONTHLY 15 DUE 04/15/17 CALLABLE $100.00 ON 04/15/05	103.310	10,331.00	4.6%	750	7.25%	33	YIELD TO CALL 4.8120% MOODY A1 S&P A ISSUE 04/18/02

Investments and services are offered through Morgan Stanley DW Inc., member SIPC

LARRY LEHRNER
9709 CAMDEN HILLS AVENUE

Account Number

Corporate Fixed Income		Current Price	Value	Pct of Assets	Est Yrly Income	Current Yield	Accruing Interest	Additional Information
Corporate Bonds								
10,000	GENERAL MOTORS ACCEPTANCE CORP 7.150% JAN/JUL 15 DUE 07/15/07 CALLABLE $100.00 ON 07/15/05	100.944	10,094.40	4.5%	715	7.08%	329	YIELD TO CALL 6.4930% MOODY A3 S&P BBB ISSUE 07/16/02
	Total Corporate Bonds		36,665.40	16.4%	1,465	3.99%	363	
Fixed-Rate Capital Securities								
800	SATURNS SERS HRZ 7000 *12JN01 7.000% JUN/DEC 01 DUE 06/01/32 CALLABLE $25.00 ON 06/26/08	25.15	20,120.00	9.0%	1,400	6.95%	0	MOODY BAA2 S&P BBB-
200	PHOENIX COS 7450 *32JA15 7.450% QTRLY APR DUE 01/15/32 CALLABLE $25.00 ON 01/15/07	25.85	5,170.00	2.3%	372	7.20%	0	MOODY BAA3 S&P BBB
400	GENL MTRS 7250 *41JL15 7.250% QTRLY OCT DUE 07/15/41 CALLABLE $25.00 ON 07/15/06	25.64	10,256.00	4.6%	725	7.06%	0	S&P BBB
	Total Fixed-Rate Capital Securities		35,546.00	15.9%	2,497	7.02%	0	
Total Corporate Fixed Income			72,211.40	32.3%	3,962	5.48%	$363	
Net Change Since Last Statement			$626.90					

Government Securities		Current Price	Value	Pct of Assets	Est Yrly Income	Current Yield	Accruing Interest	Additional Information
Federal Agencies								
11,000	FED NATL MTG ASSN 6.000% FEB/AUG 08 DUE 08/08/19	100.000	11,000.00	4.9%	660	6.00%	262	YIELD TO MATURITY 5.9990% MOODY AAA S&P AAA ISSUE 08/09/02
Total Government Securities			$11,000.00	4.9%	$660	6.00%	$262	
Net Change Since Last Statement			-24.09					

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

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CHOICE RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 2003

Account Number

LARRY LEHRNER
9709 CAMDEN HILLS AVENUE

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Morgan Stanley Mutual Funds								
1,913.741 FINANCIAL SERVICES TRUST B	13.9700	26,734.96	12.0%	N/A	N/A	132721824	FSVBX	Reinv/Reinv
Total Mutual Funds		$26,734.96	12.0%	N/A	N/A			
Net Change Since Last Statement		$1,032.73						

Unit Investment Trusts	Current Price	Value	Pct of Assets	Est Yrly Income	Current Yield	Accruing Interest	Par Value	Reinvest Option
Equity Trusts								
1,753 UNIT VK FOCUS PORTFOLIO SELECT 10 INDUSTRIAL 2003-1	11.5611	20,266.60	9.1%	658	3.25%	N/A	N/A	Full
Total Unit Investment Trusts		$20,266.60	9.1%	$658	3.25%	0	0.00	
Net Change Since Last Statement		$1,805.59						

Asset Summary	Value	Est Yrly Income
Total Asset Value	$222,437.98	$5,757
Total Net Change In Priced Assets Since Last Statement	$7,333.30	

Choice Account Details
Your Choice anniversary year started on 5/01/03 and finishes on 4/30/04.

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Dean Witter IRA 2003 Member Shelley Berkley NV-01

Date	Action	Transaction	$ Amount
1/2/2003	Bought	Ten Industrials 03-1	16,849.80
1/9/2003	Sold	MRGN STAN CAP II	15,737.62
1/9/2003	Bought	Enterprise Prod Prtnrs	14,408.00
1/13/2003	Intinc		0.32
1/15/2003	Intinc	General Motors	181.25
1/15/2003	Intinc	Phoenix Cos	93.13
1/15/2003	Intinc	General Motors	355.51
1/15/2003	Intinc	Household Finance 7.5%	62.50
1/21/2003	Div	Starwood Hotel & Resorts	130.20
1/31/2003	Intinc		3.61
2/28/2003	Sold	Enterprise Prod Prtnrs	15,999.51
3/13/2003	Bought	Medicines CO	17,500.00
3/17/2003	Intinc	Household Finance 7.5%	62.50
3/21/2003	Div	American International Group	7.24
3/27/2003	Intinc		0.49
3/28/2003	Intinc	Genl Elec Cap 6.625	248.44
3/31/2003	Intinc		8.32
4/29/2003	Sold	Medicines CO	21,149.01
5/12/2003	Intinc		0.48
5/13/2003	Bought	HRZ	20,000.00
5/15/2003	Sold	Genl Elec Cap 6 625	16,163.24
5/15/2003	Intinc	Verizon New Eng	175.00
5/15/2003	Intinc	Household Finance 7.5%	62.50
5/22/2003	Bought	MS/Intel	16,000.00
5/30/2003	Intinc		15.82
6/2/2003	Intinc	HRZ	11.67
6/11/2003	Intinc		2.25
6/16/2003	Intinc	Household Finance 7.5%	62.50
6/20/2003	Div	American International Group	7.24
6/30/2003	Intinc		3.87
7/14/2003	Intinc		0.60
7/15/2003	Intinc	GM Note 7.25	181.25
7/15/2003	Intinc	Phoenix Cos	93.13
7/15/2003	Intinc	GM 7.15	357.50
7/15/2003	Intinc	Household Finance 7 5%	62.50
7/31/2003	Intinc		3.36
8/19/2003	Sold	Verizon New Eng	10,315.51
8/20/2003	Bought	Amphenol Corp	10,000.00
9/2/2003	Intinc	Fed Natl Mtg Assn	39.00
9/6/2003	Intinc	Fannie Mae	300.00
9/6/2003	Intinc	Verizon New Eng	175.00
9/6/2003	Intinc	Fed Natl Mtg Assn	390.00
9/6/2003	Intinc	Household Finance 7 5%	62.50
9/6/2003	Intinc		3.26
9/6/2003	Intinc		0.63
9/7/2003	Intinc	Fed Natl Mtg Assn	39 00
9/7/2003	Bought	S&P Dep Recpts	12,843.75
9/12/2003	Intinc		0.64
9/15/2003	Intinc	Household Finance 7.5%	62.50
9/19/2003	Div	American International Group	10.01
9/25/2003	Div	Ten Industrials 03-1	422.74
9/25/2003	Bought	Ten Industrials 03-1	415.84
9/30/2003	Intinc		3.69
11/10/2003	Intinc		0 72
11/25/2003	Bought	Ten Industrials 03-1	112.74
11/28/2003	Intinc		3.35
12/1/2003	Intinc	Saturns Aoc	700.00
12/11/2003	Intinc		0.65
12/15/2003	ReinvLg	Financial Services Trust	339.24
12/15/2003	Intinc	Household Finance 7.5%	62.50
12/19/2003	Div	American International Group	10.01
12/25/2003	Div	Ten Industrials 03-1	113.00
12/31/2003	Intinc		4.20

Dean Witter Active Asset Member: Shelley Berkley NV-01

Date	Action	Transaction	$ Amount
1/30/2003	Intinc		0 32
1/31/2003	Div	S&P Dep Recpts	65 81
7/31/2003	Div	S&P Dep Recpts	54.40

NEPHROLOGY AND ENDOCRINE
ASSOCIATES 401(K) PLAN

Statement

October 1, 2003 - December 31, 2003

LAWRENCE M LEHRNER
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145

Date of Hire: 10/05/1987

Account Information

BALANCE

Change This Period	$30,611.85
Vested Balance	$289,170.74

YOUR CURRENT INVESTMENT CHOICES (12/31/2003)

Putnam Growth and Income Fund	10%
Putnam Voyager Fund	10%
Putnam Growth Opportunities	10%
Putnam International Equity	10%
Putnam Money Market Fund	60%

Reduce your paperwork. If you would like to stop receiving your statement in the mail, log on to www.ibenefitcenter.com and select "Statement Mailing Options" under the My Accounts tab. You can choose to receive one annual statement or no statements, and we will alert you by e-mail when your latest statement is available online. You can always resume statement mailings at any time.

INVESTMENT SUMMARY

Putnam Growth and Income Fund	$15.7100	4,285.473	$67,324.79	$17.7000	4,329.298	$76,628.57
Putnam Voyager Fund	$14.5800	1,986.276	$28,959.90	$15.8500	2,005.150	$31,781.62
Putnam Growth Opportunities	$11.8100	4,530.179	$53,501.42	$12.8200	4,553.621	$58,377.42
Putnam International Equity	$18.4100	4,395.114	$80,914.05	$20.6600	4,488.328	$92,728.86
Putnam Money Market Fund	$1.0000	27,858.728	$27,858.73	$1.0000	29,654.268	$29,654.27

Please verify this financial information and notify Putnam of any questions within 30 days of receipt. If you do not notify Putnam, we will assume the information on this statement is correct. Any corrections will be reflected on a subsequent statement.

PUTNAM INVESTMENTS

For more information visit us on the web at www.ibenefitcenter.com or call 1-877-888-401k

EFR751-CH02003076M 01 7204

Rec'd 1/6/04

Putnam 401(K) 2003 Member: Shelley Berkley NV-01

Date	Transaction	Investment	Amount
12/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.73
12/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	9.99
12/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	6.46
12/18/2003	DIVIDEND	PUTNAM INTERNATIONAL EQUITY	180.28
12/18/2003	DIVIDEND	PUTNAM INTERNATIONAL EQUITY	543.77
12/18/2003	DIVIDEND	PUTNAM INTERNATIONAL EQUITY	837.06
12/11/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	200.04
12/11/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	33.34
12/11/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	33.34
12/11/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	33.34
12/11/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	33.34
12/11/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	149.97
12/11/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	24.99
12/11/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	24.99
12/11/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	24.99
12/11/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	24.99
12/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	49.84
12/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	160.69
12/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	232.32
12/1/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	249.93
12/1/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	100.08
12/1/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
12/1/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
12/1/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
12/1/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
11/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.61
11/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	8.37
11/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	4.89
11/28/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
11/28/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
11/28/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
11/28/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
11/28/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
11/17/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
11/17/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
11/17/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
11/17/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
11/17/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
10/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.64
10/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	8.81
10/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	4.99
10/14/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
10/14/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
10/14/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
10/14/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
10/14/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
9/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.66
9/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	9.06
9/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	4.71

Member: Shelley Berkley NV-01

9/30/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
9/30/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
9/30/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
9/30/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
9/30/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
9/15/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
9/15/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
9/15/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
9/15/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
9/15/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
9/5/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
9/5/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
9/5/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
9/5/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
9/5/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
9/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	24.12
9/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	77.76
9/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	111.18
8/29/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.61
8/29/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	8.36
8/29/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	3.97
8/18/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
8/18/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
8/18/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
8/18/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
8/18/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
8/8/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
8/8/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
8/8/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
8/8/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
8/8/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
7/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.67
7/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	9.21
7/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	4.13
7/7/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
7/7/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
7/7/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
7/7/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
7/7/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
6/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.65
6/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	3.18
6/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	4.34
6/30/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
6/30/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
6/30/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
6/30/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
6/30/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
6/23/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	270
6/23/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	45
6/23/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	45
6/23/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	45

Member: Shelley Berkley NV-01

6/23/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	45
6/23/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	15240
6/23/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	2540
6/23/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	2540
6/23/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	2540
6/23/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	2540
6/9/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350 01
6/9/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
6/9/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
6/9/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
6/9/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
6/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	23.9
6/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	69.47
6/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	109.9
5/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.61
5/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	1.16
5/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	3.86
5/30/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
5/30/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
5/30/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
5/30/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
5/30/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
5/19/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
5/19/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
5/19/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
5/19/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
5/19/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
4/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.6
4/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	1.14
4/30/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	3.38
4/28/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
4/28/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
4/28/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
4/28/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
4/28/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
4/17/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
4/17/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
4/17/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
4/17/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
4/17/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
3/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.67
3/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	1.27
3/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	3.21
3/31/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
3/31/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
3/31/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
3/31/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
3/31/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
3/17/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
3/17/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
3/17/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33

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Member: Shelley Berkley NV-01

3/17/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
3/17/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
3/6/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
3/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
3/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
3/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
3/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
3/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	23.81
3/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	69.21
3/5/2003	DIVIDEND	PUTNAM GROWTH AND INCOME FUND	108.03
2/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.65
2/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	1.22
2/28/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	2.7
2/10/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
2/10/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
2/10/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
2/10/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
2/10/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
2/3/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	350.01
2/3/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	58.33
2/3/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	58.33
2/3/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	58.33
2/3/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	58.33
1/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	0.7
1/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	1.44
1/31/2003	DIVIDEND	PUTNAM MONEY MARKET FUND	2.56
1/13/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	270
1/13/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	45
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	45
1/13/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	45
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	45
1/13/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	115.68
1/13/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	19.28
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	19.28
1/13/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	19.27
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	19.27
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	50
1/13/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	150
1/13/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	25
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	25
1/13/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	25
1/13/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	25
1/6/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	30
1/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	5
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	5
1/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	5
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	5
1/6/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	150
1/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	25
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	25
1/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	25

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Member: Shelley Berkley NV-01

1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	25
1/6/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	115.68
1/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	19.28
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	19.28
1/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	19.27
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	19.27
1/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	50
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	50
1/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	50
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	50
1/6/2003	CONTRIBUTIONS	PUTNAM MONEY MARKET FUND	150
1/6/2003	CONTRIBUTIONS	PUTNAM INTERNATIONAL EQUITY	25
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH OPPORTUNITIES	25
1/6/2003	CONTRIBUTIONS	PUTNAM VOYAGER FUND	25
1/6/2003	CONTRIBUTIONS	PUTNAM GROWTH AND INCOME FUND	25

Member: Shelley Berkley NV-01

charles SCHWAB

Account Statement
Retain for Your Records

Rollover IRA
Account Number:

Statement Period: October 1, 2003 to December 31, 2003
Last Statement: September 30, 2003

Account Opened In: 1996
Page 1

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LAWRENCE M LEHRNER
CHARLES SCHWAB & CO INC.CUST
IRA ROLLOVER
9709 CAMDEN HILLS AVE
LAS VEGAS NV 89145-8610

Account Value Summary	
Cash & Sweep Money Market Funds	$ 0.00
Investments	$ 43,061.68
Total Account Value	**$ 43,061.68**

Change In Value Summary	
Change in Value Since September 30, 2003:	$ 3,651.76
Change in Value Since January 1, 2003:	$ 8,838.55

Investment Detail

Description	*Symbol*	*Quantity Long/Short*		*Price*	*Market Value*
Investments					
AMERICAN CENTURY ULTRA ◊ FUND	TWCUX	1,615.8230	L	$ 26.6500	$ 43,061.68
	Total Account Value				**$ 43,061.68**

Contribution Summary

	2002	*2003*
Traditional IRA	$ 0.00	$ 0.00
Year to Date Total:	**$0.00**	**$0.00**

Please see "Footnotes for Your Account" section for an explanation of the footnote codes and symbols on this statement.

CNCP0211-012028 717731

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SIPC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(12)

HC

(Office Use Only)

2004 MAY 14 AM 11:31

CLERK
HOUSE OF REPRESENTATIVES

Congressman Howard L. Berman
(Full Name)

2221 Rayburn Building
Washington, D.C. 20515
(Mailing Address)

202 225-4695
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 28	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Howard L. Berman	5/13/04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of California	Legislative Pension	$4,701.36

For payments to charity in lieu of honoraria, use Schedule II.

Name Howard L. Berman | Page 3 of 12

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
The Connell Company	Speech + Discussions	July 21, 2003	$2000 cc

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	Transaction P, S, E
SP	Mega Corp. Stock			X				X										P
DC	Simon & Schuster	Indefinite							X		Royalties					X		
JT	1st Bank of Paducah, KY accounts																	
SP	Schwab One Account																	
	1) Janus Fund		X					X				X						
	2.) Marisco Focus Fund		X					X				X						
	3.) Janus Twenty Fund		X					X				X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard L. Berman | Page 5 of 13

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	The assets listed below were received from a distribution of assets from a survivor's + a residual trust following the death of my mother. The assets were received on August 1, 2003																	
	Abbott Labs		X					X					X					
	American International Group		X					X					X					
	Anadarko Petroleum		X					X					X					
	Automatic Data Processing		X					X					X					
	Bellsouth Corp.		X					X					X					
	Burlington Northern		X					X					X					
	Cisco Sys Inc		X									X						
	Coca Cola Co.		X					X					X					
	Comcast Corp.		X									X						
	Dell, Inc		X									X						
	Electronic Data Systems		X					X					X					
	Emerson Electric Co.		X					X					X					
	Exxon Mobile		X					X					X					

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard L. Berman

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Fannie Mae		X					X					X					
	General Electric Co		X					X					X					
	Hewlett Packard Co		X					X					X					
	Illinois Tool Works Inc		X					X					X					
	Intel Corp.		X					X					X					
	IBM		X					X					X					
	Johnson + Johnson		X					X					X					
	Kraft Foods, Inc		X					X					X					
	McDonald's Corp		X					X					X					
	Medtronic		X					X					X					
	Merck + Co		X					X					X					
	Novell Inc		X									X	X					
	PPG Industries		X					X					X					
	Proctor + Gamble		X					X					X					
	Raytheon Co		X					X					X					
	SBC Communications		X					X					X					
	Sprint Corp.		X					X					X					
	State Street Corp.		X					X					X					
	Union Pacific Corp		X					X					X					
	Vodafone Group		X					X					X					
	Walt Disney Co		X					X					X					
	Wells Fargo + Co		X					X					X					

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard L. Berman

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $15,001 - $50,000	$50,001 - $100,000	G $100,001 - $250,000	$250,001 - $500,000	I $500,001 - $1,000,000	$1,000,001 - $5,000,000	K $5,000,001 - $25,000,000	$25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	EXCEPTED TRUST	EXCEPTED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Wrigley Wm. Jr Co		X									X							X					
	Phoenix-Kayne Small Med Cap Fund			X								X												
	Phoenix-Kayne International Fund			X								X							X					
	Van Kampers Gov't Securities Fund			X								X								X				
	Corts Ford Motor Co		X									X								X				
	General Motors Corp. 7.25% Senior Notes		X									X							X					
	Gulf Power Capital Trust III		X									X							X					
	Morgan Stanley Capital Trust		X									X							X					
	Sears Roebuck Accep Corp Senior Notes		X									X							X					
	U.S. Restaurant Properties Inc		X									X								X				
	Wells Fargo Capital		X									X							X					
	RMA Money Market Portfolio			X										X					X					
	Loma Linda Cal. Hospital Rev. Bond		X											X						X				
	Calif. State Public Works LSE Rev. Bond		X											X					X					
	Calif. State FSA Book Entry MFS		X											X					X					

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard L. Borman

Page 8 of 12

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Santa Margarita Co Dana Impt Dist 94-B		X						X				X					
	Rancho Mirage CA Redev.		X						X				X					
	Providence Farming Co (a limited partnership)			X				X					X					

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SCHEDULE IV — TRANSACTIONS

Name Howard L. Berman | Page 9 of 12

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10 12 03		X								
	NONE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B [illegible]	C $15,001–$50,000	D [illegible]	E $100,001–$250,000	F [illegible]	G $500,001–$1,000,000	H [illegible]	I $5,000,001–$25,000,000	J [illegible]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Congressional Federal Credit Union		X									
JT	Revolving Credit Cards											
	1) MNBA		X									
	2) Citibank			X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
The Aspen Institute	Jan 17–22	L.A. – Lanai, Hawaii – L.A.	Y	Y	Y	N
Public Governance Institute	Feb 28 – Mar 2	WDC – White Sulphur Springs, W.Va – Wash. D.C	Y	Y	Y	N
The Aspen Institute	June 27–July 6	WDC – Helsinki, Finland – Wash DC	Y	Y	Y	3 days
Sony Music Entertainment, Inc	July 17–18	Wash. DC. – New York, NY.	Y	Y	N	N
The Connell Company	July 21	NYC (Berkley Heights, N.J. – Wash DC	N	Y	N	N
The Aspen Institute	Aug 10–16	L.A. – Moscow, Russia – L.A.	Y	Y	Y	N
The Washington Institute for Near East Policy	Sept. 19–21	WDC – Leesburg, VA – WDC (No travel expenses paid)	Y	Y	Y	N
Center for Nonproliferation Studies	Nov. 16–17	L.A. – Monterey, CA – L.A.	Y	Y	N	N
The Aspen Institute	Dec. 4–7	L.A. – Puerto Vallarta, Mexico – L.A	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 2:21
(Office Use Only)

Robert Marion Berry
(Full Name)

1113 Longworth, House Office Building
(Mailing Address)

202-225-4076
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Arkansas District: First	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any Individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Marion Berry	5/13/04

Name	Page
Robert Marion Berry	1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	CARMAR Lowe, Inc. (Spouse)	Spouse Directors fee	1,200.00
	Marion Berry, Inc. (Spouse)	Spouse, salary	3,500.00
	Mitchell Berry, Inc. (Spouse)	Spouse, salary	2,000.00
	Pecan Post, Inc. (Spouse)	Spouse, salary	15,000.00

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page
Robert Marion Berry	2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 2003 Aug. 13, 2003	$2,000 $500
THE CONNELL COMPANY	SPEECH	MAY 2003	$ 2000

This page may be copied if more space is required.

Name Robert Marion Berry

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as Income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	SP Mega Corp Stock	E: X	DIVIDENDS: X	I: X	P
	Simon & Schuster	Indefinite	Royalties	IV: X	
	1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
SP	Marion Berry, Inc. Note 1	F: X	salary	V: X	
SP	Pecan Post, Inc. Note 2	I: X	salary	VI: X	
SP	CARMAR Lowe, Inc. Note 3	F: X	director fee	IV: X	

Examples:

Block A	Block B	Block C	Block D	Block E
Mega Corp Stock	$50,001 - $100,000	CAPITAL GAINS	$1,001 - $2,500	P
Simon & Schuster	Indefinite	Royalties	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$100,001 - $250,000	INTEREST	$1,001 - $2,500	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert Marion Berry

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1.00 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1.00 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Riceland Foods, Inc. Note4			X																	X											
	Planters & Merchants Bank of Gillett, AR Note 5			X										X									X									
	140 Main St., Gillett, AR		X																		X											
	Marion Berry, Inc. Profit sharing plan Note 6							X								X									X							
	Planters & Merchants Bank of Gillett, AR			X												X							X									
	Mony Group, Inc.		X		X									X								X										
	JT Rental (408 3rd St.) SE, Washington, DC							X							X										X							

Note 1 closely held farming corporation, Gillett, Arkansas
Note 2 Farm land ownership for rental, DeWitt, Arkansas
Note 3 Family farm land for rental, Gillett, Arkansas
Note 4 Farm cooperative patronage and equity, Stuttgart, Arkansas
Note 5 Bank stock, Gillett, Arkansas
Note 6 to Marion Berry, Inc. Profit Sharing Plan
A. Money market Stephens, Inc. and COD-Planters Bank

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Name Robert Marion Berry

Page 5 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	None														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			[redacted]	C $15,001–$50,000	[redacted]	E $100,001–$250,000	[redacted]	G $500,001–$1,000,000	[redacted]	I $5,000,001–$25,000,000	[redacted]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Bank of America, NA	Mortgage, 408 3rd Street, SE, Washington, DC	[redacted]		[redacted]		[redacted]		[redacted]		[redacted]	

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
CROP LIFE AMERICA	FEB 21-24	WASH - PALM BEACH - WASH	Y	Y	Y	N
THE CONNELL COMPANY	MAY 5	WASH - BERKLEY HEIGHTS, NJ - WASH	N	Y	N	N
DEM. LEADERSHIP COUNCIL	SEPT 12-14	WASH - MACKINAC ISLAND, MICHIGAN - WASH	Y	Y	Y	N
SOUTHERN CROP PRODUCTION ASS'N	NOV 1-3	WASH - HILTON HEAD - WASH	Y	Y	Y	N
MISS. VALLEY FLOOD CONTROL ASS'N	DEC 4-7	MEMPHIS - NEW ORLEANS - MEMPHIS	N	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director/Secretary (Spouse)	CARMAR Lowe, Inc. (Spouse)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
10/93	Marion Berry, Inc.	Retention of benefits under profit sharing plan
10/93	Marion Berry, Inc.	Return to employment upon leaving government office
10/93	CARMAR Lowe, Inc.	Spouse will continue as director/secretary of CARMAR Lowe, Inc.

GPO: 2004 91-910 (misc.)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 17 PM 2:07

(Office Use Only)

Judy Biggert
(Full Name)

425 East Sixth Street
Hinsdale IL 60521
(Mailing Address)

Daytime Telephone 202-225-3515

Filer Status: [X] Member of the U.S. House of Representatives — State: IL District: 13 — [ ] Officer or Employee — Employing Office: — [ ] Termination — Termination Date:

Report Type: [X] Annual (May 15) — [ ] Amendment

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Judy Biggert	May 17, 2004

Name Judy Biggert | Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Human Resource Advocates LLC	Spouse Salary	NA
	Illinois General Assembly, State of Illinois	Deferred Compensation	$17,266.
	Illinois General Assembly vested pension plan	Legislative Pension	$13,162

For payments to charity in lieu of honoraria, use Schedule II.

Name Judy Biggert | Page 3 of 17

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B											Block C						Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock					X								X																	P
	Simon & Schuster			Indefinite																Royalties									X		
	1st Bank of Paducah, KY accounts						X									X									X						
	Abbott Laboratories					X								X										X							
	Abbott Laboratories	X															X								X						S
	FactSet Research Sys			X										X								X									P
	Walgreen Company									X				X											X						
	Walgreen Company	X															X										X				S
	Walgreen Company	X															X								X						S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Judy Biggert

Page 5 of 17

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	D	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	L	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Valspar Corp	X										X					X			S
	Valspar Corp	X										X					X			S
	Westminster Fund III Real Estate				X								Distribution				X			
	Westminster Fund III		X										Distribution		X					P
	Westminster Fund IV				X								Distribution				X			
	Westminster Fund IV			X									Distribution			X				P
SP	ACLN LTD		X																	
SP	Aflac			X						X				X						
SP	Aflac	X									X									S
SP	Albany Molecular Research			X										X		X				P
SP	Amgen			X										X						
SP	Automatic Data Processing			X						X					X					P
SP	Becton Dickinson			X						X					X					
SP	Becton Dickinson	X									X					X				S
SP	Berkshire Hathaway			X										X						
SP	Black Box Corp			X						X					X					
SP	Black Box Corp	X											Capital Loss	X						S
SP	Boston Private Finl Hldgs																			
SP	Formly Boston Private Bancorp			X						X					X					P
SP	Choicepoint Inc			X																
SP	Choicepoint	X										X				X				S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Judy Biggert

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENTS	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Cisco Sys Inc				X																X											
SP	Concord EFS Inc			X																	X											
SP	Constellation Brands Inc			X																	X											P
SP	Fastenal Co.				X									X								X										
SP	Gannett Co. Inc			X										X								X										P
SP	General Electric Co.				X									X										X								P
SP	Gentex Corp				X									X									X									
SP	Harte Hank Inc				X									X								X										
SP	Health Mgmt Assoc Inc			X										X								X										P
SP	Home Depot				X									X									X									
SP	Illinois Tool Works				X									X									X									
SP	Intel Corp				X									X								X										
SP	Intel Corp	X															X							X								S
SP	Internet Corp			X										X								X										
SP	Investors Financial Services				X									X								X										P
SP	Jack Henry + Assoc #			X										X								X										
SP	Jefferson Pilot Corp				X									X									X									
SP	Jefferson Pilot Corp	X																		Capital loss	X											S
SP	M+T Bank Corp						X							X										X								
SP	M+T Bank Corp	X															X									X						S
SP	Johnson + Johnson					X								X										X								
SP	Kimberly Clark Corp				X									X									X									P

aka Henry Jack + Assoc Inadvertently left off 2002 Statement. Purchased 5-20-02.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Judy Biggert

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	L-3 Communications Hldgs			X																	X											P
SP	Legg Mason				X									X									X									
SP	Legg Mason	X															X								X							S
SP	MBNA Corp						X							X										X								
SP	MBNA Corp	X															X										X					S
SP	Medco Health Solutions			X																	X											P
SP	Medco Health Solutions	X																			under $1,000.											S
SP	Medtronic Inc				X									X									X									
SP	Merck & Co. Inc.				X									X										X								
SP	Microsoft Corp					X								X									X									
SP	Nextel Comm Inc				X																X											P
SP	Oracle Corp			X																	X											
SP	Patterson Dental Co				X																X											P
SP	Paychex Inc.				X									X									X									
SP	Petro Canada				X									X									X									P
SP	Pfizer				X									X									X									P
SP	Prima Energy Corp Com par = 0.815				X																X											
SP	Quest Diagnostics Inc				X																X											P
SP	Royal Dutch Petro Co.				X									X										X								P
SP	Scansource Inc				X									X										X								P
SP	Southtrust Corp				X									X									X									
SP	Southwest Water Co				X									X									X									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Judy Biggert

Page 8 of 17

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	State Street Corp					X								X										X								
SP	Stryker Corp				X									X								X										
SP	Suntrust Banks Inc			X										X									X									P
SP	Synovus Fnl Corp				X									X									X									P
SP	Techne				X																X											
SP	United Parcel Service				X									X									X									P
SP	Vodafone Group PLC				X									X								X										
SP	Wells Fargo & Co				X									X									X									P
SP	Wiley John & Sons Inc				X									X									X									P
SP	Xilinx Inc				X																X											
SP	Zimmer Hldgs				X																X											
SP	Zimmer Hldgs	X															X							X								S
SP	Amphenol	X															X							X								S
SP	Converse Tech Inc	X															X								X							S
SP	Raymond James Fnl	X															X							X								S
SP	The Internet Fund	X																		capital loss												S
SP	Charter One Fnl	X															X									X						S
SP	Freddie Mac	X															X							X								S
SP	United Parcel SVC MTBU 4.500% 10/15 2010			X												X							X									P
SP	Nextel Communications 9.500 due 2-01-11				X									X									X									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Judy Biggert

Page 9 of 17

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	US Treasury Notes 6.250% due 02-15-03	X																		Capital loss												S
SP	Vanguard Fix SHRT Term Corp Admiral Mutual								X							X											X					
SP	Vanguard Total Stock Market Port Mutual				X											X							X									
SP	Vanguard Fix Short Term Corp Admiral (IRA)			X												X						X										
SP	Vanguard Fix Inc SHT-Term Corp	X																		Capital loss												S
SP	Vanguard Fix Inc SHT-Term Corp	X																		Capital loss												S
SP	Vanguard Fix Inc SHT-Term Co. P.	X																		Capital loss												S
SP	QXL Ricardo PLC	X																		distribution	1.00 for fractional share						X					S
	Walgreen Profit Sharing Retirement																															
JT	Citigold Account			X												X						X										
	Harris Bank			X												X						X										
SP	Treasury Fund Daily Money				X											X						X										
~~JT~~	~~Vanguard Group~~			X										X								X										
	Treasury Fund Daily Money			X												X						X										S

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SCHEDULE IV — TRANSACTIONS

Name Judy Biggert

Page 10 of 17

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Valspar Corp		X		02-13-03	X									
	Valspar Corp		X		02-27-03	X									
	Walgreen Company		X		05-02-03			X							
	Walgreen Company		X		06-04-03	X									
	Abbott Labs		X		07-31-03	X									
	Fastset Research	X			03-19-03	X									
	Westminster Fund III	X			01-16-03	X									
	Westminster Fund IV	X			02-13-03	X									
	Westminster Fund IV	X			06-10-03	X									
	Westminster Fund IV	X			09-25-03	X									
SP	Petro Canada	X			02-04-03	X									
SP	Raymond James Finl Inc		X		01-17-03	X									
SP	MBNA Corp		X		01-23-03	X									
SP	MBNA Corp		X		06-25-03		X								
SP	US Treasury Notes 6.250% Due 2-15-03		X		02-18-03				X						
SP	Aflac Inc		X		03-04-03	X									

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SCHEDULE IV — TRANSACTIONS

Name: Judy Biggert

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
SP	Black Box Corp		X		03-04-03		X								
SP	Choicepoint Inc		X		03-04-03	X									
SP	Jefferson Pilot Corp		X		03-04-03	X									
SP	M + T Bank Corp		X		03-04-03		X								
SP	Zimmer Hldgs Inc.		X		03-04-03	X									
SP	The Internet Fund		X		03-11-03		X								
SP	Scansource Inc NSF LLC	X			01-06-03	X									
SP	Royal Dutch Petroleum Co.	X			01-13-03		X								
SP	Albany Molecular Research	X			01-30-03	X									
SP	Albany Molecular Research	X			08-28-03	X									
SP	Vanguard Short term Corporate Prospectus	X			02-19-03				X						
SP	Automatic Data Processing Inc	X			03-04-03		X								
SP	Patterson Dental Co.	X			03-04-03	X									
SP	Pfizer Inc	X			03-04-03	X									
SP	Techne Corp	X			03-04-03	X									
SP	Wiley John & Sons	X			03-04-03	X									

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SCHEDULE IV — TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP *Example*	Mega Corporation Common Stock	X			10-12-03		X								
SP	General Electric Co.	X			03-24-03		X								
SP	Kimberly Clark Corp	X			03-26-03	X									
SP	Southwest Water Co.	X			03-26-03		X								
SP	Synovus Finl Corp	Y			06-05-03	X									
SP	Investors Financial Services Corp	Y			06-09-03	X									
SP	Nextel Communications	X			06-09-03	X									
SP	Gannet Co.	X			06-11-03	X									
SP	Nextel Communications	X			06-11-03	X									
SP	Quest Diagnostics	X			06-20-03	X									
SP	Wells Fargo & Co.	X			06-24-03		X								
SP	Charter One Finl		X		06-05-03		X								
SP	Vanguard Fix Inc Sht term Corporate		X		06-10-03		X								
SP	Freddie Mac		X		06-12-03	X									
SP	Legg Mason		X		06-12-03	X									
SP	Vanguard Fix Inc Short term Corporate		X		06-23-03			X							
SP	United Parcel Svc	X			07-02-03		X								

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SCHEDULE IV — TRANSACTIONS

Name Judy Biggert

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
SP	Vanguard Short-term Corp Admiral	X			08-26-03						X				
SP	Constellation Brands Inc	X			08-28-03	X									
SP	Health Mgmt Assoc	X			08-28-03	X									
SP	L-3 Communications Hldgs	X			08-28-03	X									
SP	Quest Diagnostics	X			08-28-03	X									
SP	Boston Private Finl Hldgs Fendy	X			08-29-03	X									
SP	Vanguard Fix Inc Short Term Corp		X		08-28-03						X				
SP	Amphenol		X		08-28-03	X									
SP	Cimarex Tech Inc		X		08-28-03	X									
SP	Legg Mason Disc		X		08-28-03	X									
SP	Legg Mason		X		11-17-03	X									
SP	Becton Dickinson & Co		X		12-03-03	X									
SP	QXL Ricardo plc		X		12-12-03	$1.00 in lieu of Fractional Share									
SP	Medco Health Solutions		X		08-25-03	under $1,000									
SP	Medco Health Solutions	X			12-08-03	X									

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Name Judy Biggert | Page 14 of 17

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
SP	M+T Bank Corp		X		08-26-03		X								
SP	Intel Corp		X		09-22-03	X									
SP	Vanguard Fix Inc Sht Term Admiral Treasury Fund Daily Money Class 7 day Av.		X		11-13-03		X								
			X		12-02-03	X									

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Name Judy Biggert | Page 15 of 17

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B [illegible]	C $15,001–$50,000	D [illegible]	E $100,001–$250,000	F [illegible]	G $500,001–$1,000,000	H [illegible]	I $5,000,001–$25,000,000	J [illegible]	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Aspen Institute	Feb 14-19	Wash. DC - Jamaica - Wash DC.	Y	Y	Y	N

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Name Judy Biggert | Page 17 of 17

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
12/31/98	Illinois General Assembly vested Pension Plan	Payable monthly

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page No.

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 2:50
MC
U.S. HOUSE OF REPRESENTATIVES

Michael Bilirakis, M.C.
(Full Name)

2269 Rayburn HOB Washington, DC 20515
(Mailing Address)

202-225-5755
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: FL District: 09	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Michael Bilirakis	5/13/04

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Michael Bilirakis, M.C.

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
American College of Physicians, Wash., DC	Speech	Feb. 10, 2003	$500 (payment delayed-sponsor sent check 5/04)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Bilirakis, M.C.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	3 Com/Palm - IRA	$1 - $1,000	NONE	NONE	
JT	A. G. Edwards -Centennial Money Market	$1 - $1,000	Interest	$1 - $200	
	A.G. Edwards-Centennial Money Market - IRA	$1 - $1,000	Interest	$1 - $200	
SP	A.G.Edwards Centennial Money Market -IRA	$1 - $1,000	Interest	$1 - $200	
JT	Adelphia - Stock	None	NONE	NONE	Other- (Company bankrupt)
SP	AIG - IRA Annuity	$50,001 - $100,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Bilirakis, M.C.

	AIG- IRA Annuity	$100,001 - $250,000	DIVIDENDS	NONE	
JT	Bank America (CDs & Savings)	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	Bldg. (1/2) Athens & Pinellas, Tarpon Springs, FL	$15,001 - $50,000	NONE	NONE	
JT	Cellstar - Stock	$1,001 - $15,000	NONE	NONE	
	Cisco - Stock - IRA	$1,001 - $15,000	NONE	NONE	
JT	Cisco- Stock	$1,001 - $15,000	NONE	NONE	P
SP	Concord Camera - Stock - IRA	$1 - $1,000	NONE	NONE	
JT	Cong. Fed. Credit Union (CDs, Checking, Savings)	$15,001 - $50,000	Interest	$2,501 - $5,000	
JT	Corning Stock	$1,001 - $15,000	NONE	NONE	
SP	Corning Stock -IRA	$1,001 - $15,000	NONE	NONE	
JT, SP	DSL Net - Stock	$1 - $1,000	NONE	NONE	
JT	Emerson Radio Stock	$1,001 - $15,000	NONE	NONE	
JT	First Union (CD, Savings)	$1,001 - $15,000	Interest	$201 - $1,000	
SP	FL Bancshares - Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Bilirakis, M.C.

JT	Ford Motor Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P (add'l. shares)
SP	Fortis Securities	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
JT	General Electric	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Great Subs, Inc. - Mortgage Note	$50,001 - $100,000	INTEREST/CAPITAL GAINS	$5,001 - $15,000	Other-loan satisfied
SP	Health Axis	$1 - $1,000	NONE	NONE	
JT	House (previous residence), 304 Driftwood Dr., Palm Harbor, FL	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	IBM - Stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	IBM - Stock - IRA	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Intel - Stock - IRA	$1,001 - $15,000	NONE	NONE	S
	JDS Uniphase Stock -IRA	$1 - $1,000	NONE	NONE	S
	Kinross Gold - IRA	$1,001 - $15,000	NONE	NONE	S
SP, JT	Lots (unimproved), Tarpon Springs, FL	$50,001 - $100,000	NONE	NONE	
JT	MSDW Liquid Asset Fund	$1 - $1,000	INTEREST	$1 - $200	
	NY Life Variable Annuity	$15,001 - $50,000	N/A	N/A	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Billirakis, M.C.

JT	Oppenheimer MSIG - Class B Fund	$1,001 - $15,000	Dividends	$1 - $200	
JT	Peoples FL Banking Corp - Stock, Savings, CDs	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	Prudential Financial	$15,001 - $50,000	NONE	NONE	
	Prudential Financial	$15,001 - $50,000	NONE	NONE	
JT	Raymond James - Heritage Cash Fund	$1 - $1,000	INTEREST	$1 - $200	
SP	Raymond James Heritage Cash Fund	$1 - $1,000	INTEREST	$1 - $200	
SP	Raymond James Heritage Cash Fund - IRA	$1 - $1,000	INTEREST	$1 - $200	
JT	Scudder Municipal Fund (formerly Kemper Mun. Bond Fund)	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	Sears Pref, ACC QUIB	$1,001 - $15,000	INTEREST	$201 - $1,000	Other (called)
JT	South Financial Group	$15,001 - $50,000	DIVIDENDS	$1 - $200	P (add'l. shares)
JT	Suburban Propane - Stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Sun Micro System Stock - IRA	$1 - $1,000	NONE	NONE	S
JT, SP	SunTrust Bank (CD, Savings, Stock)	$50,001 - $100,000	INTEREST/DIVIDENDS	$2,501 - $5,000	
JT	Tech Data - Stock	$1,001 - $15,000	NONE	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael Bilirakis, M.C.

JT	Terremark Stock	$1 - $1,000	NONE	NONE	
SP	Time Warner	$1,001 - $15,000	NONE	NONE	P
SP	Time Warner - IRA (formerly AOL)	$1,001 - $15,000	NONE	NONE	
SP	TV Azteca - IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	TV Azteca - Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	TV Azteca- IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	S (only 150 shares)
JT	U.S. Bank - Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
JT	Wells Fargo - Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE IV - TRANSACTIONS

Name Michael Bilirakis, M.C.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	South Financial Group (purchased add'l. shares)	P	10-30-03	$1,001 - $15,000
JT	U.S. Bank	P	10-30-03	$1,001 - $15,000
JT	Wells Fargo Bank	P	10-30-03	$15,001 - $50,000
SP	Time Warner	P	07-08-03	$1,001 - $15,000
JT	Cisco	P	06-27-03	$1,001 - $15,000
JT	General Electric - Stock	P	06-27-03	$1,001 - $15,000
JT	IBM - Stock	P	06-27-03	$15,001 - $50,000
JT	Ford - Stock (purchased add'l. shares)	P	06-24-03	$1,001 - $15,000
	Intel - Stock - IRA	S	12-23-03	$1,001 - $15,000
	JDS Uniphase - Stock - IRA	S	12-23-03	Under $1,001
	Kinross Gold - IRA	S	12-23-03	$1,001 - $15,000
	Sun Micro System - Stock - IRA	S	12-23-03	Under $1,001

SCHEDULE IV - TRANSACTIONS

Name Michael Bilirakis, M.C.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	TV Azteca - IRA (sold only 150 shares)	S	12-23-03	$1,001 - $15,000
	Great Subs, Inc. - (Mortgage note satisfied)	Other	01/03	$50,001 - $100,000
JT	Sears Pref, ACC QUIB - (Stock called)	Other	2003	$1,001 - $15,000
JT	Adelphia - Stock (Company bankrupt)	Other	—	—

SCHEDULE V - LIABILITIES

Name Michael Bilirakis, M.C.

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Bank of America	Mortgage on 4538 Bartelt Rd, Holiday, FL (Law Building)	$15,001 - $50,000
JT	Cong. Fed. Credit Union	Acquired loan for son (secured by CD)	$1,001 - $15,000
JT	Homeside Mortgage	Mortgage on former home - now rental (304 Driftwood Dr., Palm Harbor, FL)	$100,001 - $250,000
	Northwestern Mutual	Cash value loan on life insurance	$50,001 - $100,000
	Southeast Financial	Personal Loan	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Michael Bilirakis, M.C.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Consumer Electronic Assn.	Jan.9-11	Wash, DC - Las Vegas-Tampa	Y	Y	Y	NONE
Pinellas Co. Osteopathic Mecial Society	June 6-9	Wash, DC - Las Vegas - DC	Y	Y	Y	NONE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(6)

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:38
(Office Use Only)

MC

300

ROBERT WILLIAM BISHOP
(Full Name)

74 NORTH 300 EAST
BRIGHAM CITY, UT 84302
(Mailing Address)

202-225-0453
Daytime Telephone:

Filer Status [X] Member of the U.S. House of Representatives — State: UTAH District: 01 — [ ] Officer or Employee — Employing Office:

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert Bishop	5-17-04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
UTAH STATE RETIREMENT SYSTEM	EDUCATOR PENSION	25,466.08
BOX ELDER SCHOOL DISTRICT	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name ROB BISHOP | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source	Value of Asset (A–L)	Type of Income	Amount of Income (I–XI)	Transaction
SP, DC, JT	*Examples:* SP Mega Corp. Stock	E: $50,001 – $100,000	DIVIDENDS: X	V: $2,501 – $5,000	P
	DC Simon & Schuster	Indefinite	Other Type of Income (Specify For Example, Partnership Income or Farm Income): Royalties	X: $20 – $1,000	
	JT 1st Bank of Paducah, KY accounts		INTEREST: X	VI: $5,001 – $15,000	
JT	INVESCO	D: $15,001 – $50,000	CAPITAL GAINS: X	X: $100,001 – $1,000,000	
JT	BARNES BANK ACCOUNTS	D: $15,001 – $50,000			

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			[illegible]	C $15,001–$50,000	D [illegible]	E $100,001–$250,000	F [illegible]	G $500,001–$1,000,000	H [illegible]	I $5,000,001–$25,000,000	J [illegible]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	MBNA AMERICA	CREDIT CARD		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	US ASSOC. OF FORMER MEMBERS OF CONGRESS	APR 11-21	DC - FRANKFURT - DC	Y	Y	Y	4 DAYS

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
MEMBER, BOARD OF DIRECTORS	BRIGHAM CITY COMMUNITY HOSPITAL (UNCOMPENSATED)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

HAND DELIVERED

LEGISLATIVE RECORDS AND REPORTS
2004 MAY 14 AM 9:18
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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Sanford D. Bishop, Jr.
(Full Name)

2429 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-3631
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: GA District: 02 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☑ No ☐
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4. § 104 and U.S.C. § 1001).

Certification
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.

Signature of Reporting Individual: Sanford D. Bishop Jr.

Date (Month, Day, Year): 5/13/04

SCHEDULE I - EARNED INCOME

Name Sanford D. Bishop, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Consolidated Government of Columbus, Georgia	Spouse Salary	$52,500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sanford D. Bishop, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	South Trust Bank of Columbus,Ga	$1 - $1,000	INTEREST	$1 - $200	n/a
	Lot 24A Lakemont Heights, Hartwell,Ga.	$1,001 - $15,000	None	NONE	n/a
	Congressional Federal Credit Union	$1 - $1,000	INTEREST	$1 - $200	n/a
	AmSouth Bank,NA, Mobile,Alabama	$1,001 - $15,000	INTEREST	$1 - $200	n/a
**Jt	Commonwealth Bank, Mobile, Alabama	$1,001 - $15,000	INTEREST	$1 - $200	n/a
**Jt	House and lot at 311 Yates St., Starkeville, Ms.	$15,001 - $50,000	RENT	NONE	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sanford D. Bishop, Jr.

**Jt	Merrill Lynch CMA Money Market	$15,001 - $50,000	DIVIDENDS	NONE	n/a
**Jt	Prudential Securities	$50,001 - $100,000	DIVIDENDS	NONE	n/a
**Jt	AmSouth Bank NA, Mobile,Alabama	$15,001 - $50,000	INTEREST	$201 - $1,000	n/a
**Jt	AmSouth Bank NA, Mobile, Alabama	$15,001 - $50,000	INTEREST	$201 - $1,000	n/a
**	All income paid to Joint Tenant				

SCHEDULE V - LIABILITIES

Name Sanford D. Bishop, Jr.

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Congressional Federal Credit Union	Revolving Charge Account	$10,001 - $15,000
	U.S. House of Representatives Thrift Savings	Loan for Down payment on D.C. Residence	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Sanford D. Bishop, Jr.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Congressional Black Caucus Political Education & Leadership Institute	June 6-8	Wash.,D.C.--Charleston,S.C.--Wash.,D.C.	Y	Y	Y	n/a

SCHEDULE VIII - POSITIONS

Name Sanford D. Bishop, Jr.

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Tubman African-American Museum Macon,Ga.
Board Member	William H. Spencer Golden Owlettes, Columbus,Ga.
Board Member	Liberty Theater, Columbus,Ga.
Board Member	Friends of Albany Theatre, Albany,Ga.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

MAY 1 - 2004
LEGISLATIVE RESOURCE CENTER
2004 MAY 19 AM 1:42
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(4)
MC
(Office Use Only)

TIMOTHY H. BISHOP
(Full Name)

129 WOOLEY STREET
(Mailing Address)

SOUTHAMPTON NY 11968
Daytime Telephone (202) 225-3826

Filer Status	☒ Member of the U.S. House of Representatives — State: NEW YORK District: 1ST	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☒	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tim Bi	5/7/04

Name TIMOTHY H. BISHOP	Page 2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	LONG ISLAND UNIVERSITY	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	CITIBANK ADVANTAGE	CREDIT CARD	X				
JT	MBNA MASTER CARD	CREDIT CARD	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
MR. + MRS. ROBERT F. X. SULLIVAN	TUITION, FEES + ROOM + BOARD EXPENSES FOR	$~~[illegible]~~
	JENNIFER MEGHAN, FALL '03 TERM	$11,524.72
	TUITION + FEES + ROOM + BOARD EXPENSES FOR	$10,047.58
	JENNIFER MEGHAN, SPRING '03 TERM	

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TREASURER	BRIDGEHAMPTON CHILD CARE & RECREATION CENTER
BOARD MEMBER	EASTERN LI COASTAL/CONSERVATION 4 LIFE MUSIC

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(6)

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 AM 10: 28

HC

(Office Use Only)

MARSHA WEDGEWORTH BLACKBURN
(Full Name)

1 509 CANNON BUILDING
WASHINGTON, D.C.
(Mailing Address)

202 225 2811
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State: TN District: 07	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Marsha Blackburn	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ACTIVE RESOURCE TECHNOLOGIES, New York, New York	Spouse Salary	NA
	WORTH PLANNING, INC., New York, New York	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X Over $1,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock	Indefinite	X	X	P
	Simon & Schuster	X	X	X	
	1st Bank of Paducah, KY accounts		Royalties	X	
	Franklin Income Trust Fund Class A	X		X	
	Northwestern Mutual Variable Annuity (IRA)	X	X	X	
SP	Morgan Stanley IRA (below)	X	X	X	
SP	IRA a) American Opportunities Fund	X		X	
SP	IRA b) U.S. Gov't Securities Fund	X	X	X	
SP	IRA c) Special Growth Port. A	X		X	

Formerly held by Rep. Blackburn as the custodian for her son who was minor at the time of purchase and independently. This is another asset.

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MARSHA W. BLACKBURN

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	IRA d) MSIF Active Int'l Allcx Fund				X									X									X									
SP	IRA e) MSIF Equity Growth Port A				X									X								X										
SP	BAXTER INT'L, DEERFIELD, IL			X										X								X										
SP	PRIVATE BUSINESS, INC, BRENTWOOD, TN			X																	X											
SP	NORTHWESTERN MUTUAL VARIABLE ANNUITY				X												X									X						
SP	BANK OF AMERICA IRA (below)				X									X								X										
SP	IRA a) ALLIANCE TECHNOLOGY CLASS B				X																X											
SP	IRA b) B&A MONEY MARKET			X										X								X										
	FRANKLIN NAT'L BANK ACCOUNT	X													(ACCOUNT			CLOSED)														
SP	FRANKLIN NAT'L BANK ACCOUNT			X												X						X										
SP	FRANKLIN FINANCIAL CORP STOCK	X												A			B					A	B									S

This page may be copied if more space is required.

Name MARSHA W. BLACKBURN | Page 5 of 6

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
SP	FRANKLIN FINANCIAL CORP STOCK		X		10-08-03	X									

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	WASHINGTON COUNTY REPUBLICAN PARTY	5/9/03	WASH., D.C - JOHNSON CITY, TN	N	N	N	N
	TN MALT BEVERAGE ASS'N	7/29 - 7/31/03	MEMPHIS, TN - FT. WALTON, FL	Y	N	Y	N
	NAT'L FOUNDATION OF WOMEN LEGISLATORS	8/29 - 8/31/03	NASHVILLE, TN - LAS VEGAS, NV - NASHVILLE, TN	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

7 INSIDE MAIL

2004 MAY 28 AM 11: 30

MC

(Office Use Only)

Earl Blumenauer
(Full Name)

2446 Rayburn Washington, DC 20515
(Mailing Address)

(202)225-4811
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: OR District: 03	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Earl Blumenauer	5/19/04

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Earl Blumenauer

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Mutual Beacon	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	NA
Mutual Discovery	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	NA
Aetna Money Market Fund	$15,001 - $50,000	INTEREST	$201 - $1,000	NA
Aetna Fixed Plus Account	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
MFS Cap. Opp.	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	NA
Solomon Bro. Agressive Growth	$1,001 - $15,000	DIVIDENDS	$2,501 - $5,000	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Earl Blumenauer

Oregon Public Employee Retirement Account	$250,001 - $500,000	NA	NA	NA
TSP Federal Employee	$100,001 - $250,000	NA	NONE	NA
Melissa Anne Apartments, LLC 7720 E. Burnside Portland, OR	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
Glisan Street Apts. 1701 NW Glisan Portland, OR	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
Apartments 3701-3705 SE 37th Place Portland, OR	$100,001 - $250,000	Rent	$15,001 - $50,000	NA
Duplex 510 6th Street SE Washington, DC	$250,001 - $500,000	Rent	$5,001 - $15,000	NA
Chelsea Court 130 NW 19th St. Portland, OR	$100,001 - $250,000	Rent	$5,001 - $15,000	NA
Congressional Credit Union	$15,001 - $50,000	INTEREST	$201 - $1,000	NA
Schwab Money Market	$1,001 - $15,000	INTEREST	$1 - $200	NA
Japan (Scudder) Fund	$15,001 - $50,000	DIVIDENDS	NONE	NA
Schwab 1000	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	NA
Schwab Small Cap	$15,001 - $50,000	DIVIDENDS	$1 - $200	NA
Calvert Social Balanced	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Earl Blumenauer

Portland Teachers Credit Union	$15,001 - $50,000	INTEREST	$201 - $1,000	NA
Nordel-Nordel 2166 NW Irving	$15,001 - $50,000	RENT	$5,001 - $15,000	NA
Nordel-Mitchell 629 NW Irving	$15,001 - $50,000	RENT	$5,001 - $15,000	NA
Powell Gardens 3410 SE 33rd Portland, OR	$15,001 - $50,000	Rent	$5,001 - $15,000	NA
SNXFX Sector SPDR Tech Silent Shares	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
POTCX Potomac OTC Plus	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
Townhouse 2441 NE Weidler Portland, OR	$250,001 - $500,000	NA	NA	NA

SCHEDULE V - LIABILITIES

Name Earl Blumenauer

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Bank of America	Mortgage 7720 E. Burnside Portland, OR	$15,001 - $50,000
	Washington Mutual	Mortgage 3701-3705 SE 35th Place Portland, OR	$15,001 - $50,000
	American Pac Bank	Mortgage Chelsea Court 130 NW 19th Portland, OR	$15,001 - $50,000
	M&T Realty Buffalo, NY	Mortgage Glisan Townhouses 1701 NW Glisan Portland, OR	$15,001 - $50,000
	M&T Realty Buffalo, NY	Mortgage Powell Gardens 3410 SE 33rd Portland, OR	$50,001 - $100,000
	Ruth Sprinkling	Mortgage 2441 NE Weidler Portland, OR	$100,001 - $250,000
	Intervest Mortgage Spokane, WA	Mortgage 2166 NW Irving Portland, OR	$15,001 - $50,000
	Intervest Mortgage Spokane, WA	Mortgage 629 SE Morrison Portland, OR	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Earl Blumenauer

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Washington Mutual	Mortgage 3701-3706 SE 35th Place Portland, OR	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Earl Blumenauer

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Los Angeles County Metropolitan Transit Authority	February 20 - 21	Portland, OR -- Los Angeles, CA	Y	Y	N	N/A
Public Governance Institute - Bipartisan Congressional Retreat	February 28 - March 2	Washington, DC-- Washington, DC	Y	Y	Y	N/A
Congressional Program of the Aspen Institute	May 24 - June 1	Washington, DC -- Rome, Italy -- Washington, DC	Y	Y	Y	2 days
Rail-Volution	Sept. 11 - 14	Washington, DC -- Atlanta, GA	Y	N	N	N/A
MacArthur Foundation	October 30 to 31	Washington, DC -- Chicago -- Portland, OR	Y	N	N	N/A
The Congressional Program of the Aspen Institute	December 4 - 7	Portland, OR -- Punta Mita, Mexico -- Washington, D.C.	Y	Y	Y	N/A

EARL BLUMENAUER
THIRD DISTRICT, OREGON

COMMITTEES
TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEES
HIGHWAYS, TRANSIT AND PIPELINES
WATER RESOURCES AND ENVIRONMENT
RAILROADS

INTERNATIONAL RELATIONS
SUBCOMMITTEES
ASIA AND THE PACIFIC
EUROPE

Congress of the United States
House of Representatives
Washington, DC 20515-3703

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WASHINGTON, DC 20515
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FAX (202) 225 8941

DISTRICT OFFICE
729 N.E. OREGON STREET
SUITE 165
PORTLAND, OR 97232
(503) 231 2300

www.house.gov/blumenauer

LEGISLATIVE RESOURCE CENTER
2004 JUN -4 PM 2:58
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL

mc

June 4, 2004

The Honorable Jeff Trandahl
Office of the Clerk
H154 Capitol
Washington, DC 20515

Dear Mr. Trandahl:

Recently I filed my 2003 Financial Disclosure Statement. I now realize that some items were inadvertently left off and I would like to herewith amend my statement.

First of all, I listed my townhouse in Portland, even though it was my primary residence for the year 2003, because as of January of this year it is now no longer my primary residence.

Next, would you please add the following item to Schedule III:

T - Rowe Price New Asia; $2501 - $15,000 (Year-End Value of Asset); DIVIDENDS (1-200);NA (transaction)

Finally, the following assets were reported on the 2003 Statement but were purchased in 2002. Please add them to my 2002 Financial Disclosure statement:

SNXFX Sector SPDR Tech Select Shares; $1,000 - $50,000 (Year-End Value of Asset); DIVIDENDS (1-200); $1001-$2,500 (amount of income)

POTCX Potomac OTC Plus; $1,000 - $50,000 (Year-End Value of Asset); DIVIDENDS (1-200); $2,501-$15,000 (amount of income); NA (transaction)

I appreciate your attention to this matter and apologize for the inconvenience. If there are questions on these addendums, please contact either me or my Administrative Assistant, Mariia Zimmerman at 202-225-4811.

Sincerely,

Earl Blumenauer

Earl Blumenauer
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 13 PM 2:58

(15) MC

(Office Use Only)

ROY BLUNT
(Full Name)

P.O. Box 50100
SPRINGFIELD, MO 65805
(Mailing Address)

Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State MO District: 7	☐ Officer or Employee	Employing Office.
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Roy Blunt	May 11, 2004

Name BLUNT, ROY | Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ALTRIA CORPORATE SERVICES	Spouse's Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: None	$1 - $1,000	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP Mega Corp. Stock					X								X										X								P
		Simon & Schuster			Indefinite																Royalties									X			
		1st Bank of Paducah, KY accounts						X									X									X							
	41 acres farmland - Simpsonville, KY								X																	X							
	Church Hill Office Util Asst.					X																X											
	Hartford Mutual Fund 113 Prince St - Stratford				X			X																	X								
SP	Cisco				X																												
SP	Altria (Kraft)				X																		X										
SP	Lockheed MARTIN				X																		X										

For additional assets and unearned income, use next page.

Name Blunt, Roy

Page 4 of 6

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ~~$1,001–$15,000~~	C $15,001–$50,000	D ~~$50,001–$100,000~~	E $100,001–$250,000	F ~~$250,001–$500,000~~	G $500,001–$1,000,000	H ~~$1,000,001–$5,000,000~~	I $5,000,001–$25,000,000	J ~~$25,000,001–$50,000,000~~	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Commercial Bldg 113 Pine St Stratford		X		11/1/03			X							
	Cisco Stock		X		2/1/03	X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B	C	D	E	F	G	H	I	J	K
			[illegible]	$15,001–$50,000	[illegible]	$100,001–$250,000	[illegible]	$500,001–$1,000,000	[illegible]	$5,000,001–$25,000,000	[illegible]	Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	41 acres farmland - Stratford, Mo	mortgage					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	see letters attached	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Congressional Institute	1/29-31	WASH DC - St Michaels MD	Y	Y	N	N
	Dairy Farmers of America	3/24	WASH DC - KC MO - WASH DC	N	Y	N	N
	Congressional Institute	2/6-9	WASH DC - Greenbrier DC	Y	Y	N	N

This page may be copied if more space is required.

Name	Page of

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2004 91-810 (misc)

Use additional sheets if more space is required.

ROY BLUNT
MEMBER OF CONGRESS
7TH DISTRICT, MISSOURI

MAJORITY WHIP

COMMITTEE ON
ENERGY AND COMMERCE

STEERING COMMITTEE

Congress of the United States
House of Representatives
Washington, DC 20515

217 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-6536
FAX: (202) 225-5604

OFFICE OF THE MAJORITY WHIP
H-329, THE CAPITOL
WASHINGTON, DC 20515
(202) 225-0197
FAX: (202) 226-1115

September 15, 2003

The Honorable Joel Hefley
Chairman
Standards of Official Conduct
HT-2, the Capitol
Washington, DC 20515

Dear Mr. Chairman:

I am getting married to Abigail Perlman on October 18, 2003 here in Washington, DC. Ms. Perlman is a registered lobbyist. I anticipate receiving wedding gifts in connection with this event and I would like to request a waiver of the limitations of the gift rule to allow me to accept gifts in connection with my wedding.

I would also appreciate receiving any special guidance in connection with this request for a gift rule waiver that might apply in light of my fiancée's profession as a lobbyist. If you have any questions, please contact Amy Field on my staff at 225-6536.

Sincere regards,

Roy Blunt

Roy Blunt
Majority Whip

2004 MAY 13 PM 2:58

2740-B EAST SUNSHINE
SPRINGFIELD, MISSOURI 65804
(417) 889-1800
FAX: (417) 889-4915

blunt@mail.house.gov
www.house.gov/blunt
http://majoritywhip.house.gov

101 RANGE LINE ROAD, BOX 20
JOPLIN, MISSOURI 64801
(417) 781-1041
FAX: (417) 781-2832

10/01/2003 13:47 FAX 202 225 7392 002

JOEL HEFLEY, COLORADO
CHAIRMAN

DOC HASTINGS, WASHINGTON
JUDY BIGGERT, ILLINOIS
KENNY C. HULSHOF, MISSOURI
STEVEN C. LATOURETTE, OHIO

JOHN E. VARGO,
CHIEF COUNSEL/STAFF DIRECTOR

VIRGINIA H. JOHNSON,
COUNSEL TO THE CHAIRMAN

COLLEEN McCARTY,
ASSISTANT TO THE RANKING
MINORITY MEMBER

ALAN B. MOLLOHAN, WEST VIRGINIA
RANKING MINORITY MEMBER

STEPHANIE TUBBS JONES, OHIO
GENE GREEN, TEXAS
LUCILLE ROYBAL-ALLARD, CALIFORNIA
MICHAEL F. DOYLE, PENNSYLVANIA

SUITE HT-2, THE CAPITOL
(202) 225-7103

ONE HUNDRED EIGHTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

September 24, 2003

The Honorable Roy Blunt
U.S. House of Representatives
217 Cannon House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your September 15, 2003 letter requesting a waiver of the House Gift Rule to enable you to accept gifts that you receive in connection with your wedding to Ms. Abigail Perlman on October 18, 2003. Your letter notes that Ms. Perlman is a registered lobbyist.

The gift rule (House Rule 25, clause 5) permits the Committee on Standards of Official Conduct to waive the prohibitions on the acceptance of gifts in "an unusual case." The Committee has determined that a special occasion, such as a wedding, is an appropriate circumstance in which to exercise its waiver authority; therefore, on behalf of the Committee, we grant your request.

Notwithstanding the grant of this waiver, you should exercise caution in accepting any gift that likely would not have been offered but for your status as a Member of the House. With regard to any such gift, you should consider its source, nature, and value, as well as any possible conflict of interest with official duties.

This letter applies only to the acceptance of gifts under the gift rule. Gifts totaling more than $285 from a single source must be reported on your annual Financial Disclosure Statement; however, gifts having a value of $114 or less need not be counted towards that $285 limit. If you also wish a waiver of the statutory reporting requirement, you should separately write to the Committee with that request. Any such request will be made publicly available pursuant to section 102(a)(2)(C) of the Ethics in Government Act.

Your letter also requests any special guidance that might apply in light of Ms. Perlman's profession as a lobbyist. In this regard, we are aware of reports in the news media stating that her employer has established a policy under which Ms. Perlman is precluded from lobbying any House leadership office. If you or she would verify the policy she follows with regard to lobbying House Members and staff, the Committee would be better able to provide guidance addressed to your specific circumstances.

The Honorable Roy Blunt
September 24, 2003
Page 2

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Joel Hefley
Chairman

Alan B. Mollohan
Ranking Minority Member

JH/ABM:jev

ROY BLUNT
MEMBER OF CONGRESS
7TH DISTRICT, MISSOURI

MAJORITY WHIP

COMMITTEE ON
ENERGY AND COMMERCE

STEERING COMMITTEE

Congress of the United States
House of Representatives
Washington, DC 20515

217 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-6536
FAX (202) 225-5604

OFFICE OF THE MAJORITY WHIP
H-329, THE CAPITOL
WASHINGTON, DC 20515
(202) 225-0197
FAX (202) 226-1115

October 1, 2003

RECEIVED
2003 OCT -2 PM 2:33
COMMITTEE ON STANDARDS

The Honorable Joel Hefley
Chairman
Standards of Official Conduct
HT-2, the Capitol
Washington, DC 20515

Dear Mr. Chairman:

As you are aware, I will be getting married on October 18, 2003. I have already received a waiver allowing me to receive wedding gifts. However, to prevent the paperwork of filing numerous disclosure forms for every gift my wife and I receive, I am requesting a waiver from any financial reporting requirements regarding all wedding gifts.

If you have any questions, please contact Amy Field on my staff at 225-6536. Thank you for your consideration in this matter.

INSIDE MAIL
LEGISLATIVE RESOURCE CENTER
2003 OCT 31 AM 11:26
U.S. HOUSE OF REPRESENTATIVES

Sincerely,

Roy Blunt
Majority Whip

2740-B EAST SUNSHINE
SPRINGFIELD, MISSOURI 65804
(417) 889-1800
FAX (417) 889-4915

blunt@mail.house.gov
www.house.gov/blunt
http://majoritywhip.house.gov

101 RANGE LINE ROAD, BOX 20
JOPLIN, MISSOURI 64801
(417) 781-1041
FAX (417) 781-2632

JOEL HEFLEY, COLORADO
CHAIRMAN

DOC HASTINGS, WASHINGTON
JUDY BIGGERT, ILLINOIS
KENNY C. HULSHOF, MISSOURI
STEVEN C. LATOURETTE, OHIO

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COUNSEL TO THE CHAIRMAN

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ASSISTANT TO THE RANKING
MINORITY MEMBER

ONE HUNDRED EIGHTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

ALAN B. MOLLOHAN, WEST VIRGINIA
RANKING MINORITY MEMBER

STEPHANIE TUBBS JONES, OHIO
GENE GREEN, TEXAS
LUCILLE ROYBAL-ALLARD, CALIFORNIA
MICHAEL F. DOYLE, PENNSYLVANIA

SUITE HT-2, THE CAPITOL
(202) 225-7103

October 3, 2003

(2)

MC

The Honorable Roy Blunt
U.S. House of Representatives
217 Cannon House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your letter of October 1, 2003 in which you requested a waiver pursuant to section 102(a)(2)(C) of the Ethics in Government Act, of the reporting requirements for gifts you and your fiancée expect to receive in connection with your wedding on October 18, 2003.

On behalf of the Committee, we grant your request. The Legislative Resource Center is being notified in accordance with the statutory requirement that waiver requests be made a part of the public record.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Joel Hefley
Chairman

Alan B. Mollohan
Ranking Minority Member

2003 OCT 31 AM 11:26
LEGISLATIVE RESOURCE CENTER
HOUSE OF REPRESENTATIVES
INSIDE MAIL

JH/ABM: bcs

☒ *Original* ☐ *Amendment*

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

NAME OF MEMBER OR OFFICER (PRINT OR TYPE): Roy Blunt

NAME OF ACCOMPANYING FAMILY MEMBER (if any): _____

RELATIONSHIP TO MEMBER/OFFICER (check one): ____ spouse ____ child

DATES OF TRAVEL: January 29-31 2003

DATES AT PERSONAL EXPENSE: _____

ITINERARY: St. Michaels, Maryland

SPONSOR (WHO PAID FOR THE TRIP): The Congressional Institute

PURPOSE OF TRIP: Leadership Retreat

TOTAL TRANSPORTATION EXPENSES:

For Member or Officer: ∅

For accompanying spouse or child: _____

TOTAL LODGING EXPENSES:

For Member or Officer: $307.00

For accompanying spouse or child: _____

TOTAL MEAL EXPENSES:

For Member or Officer: $410.00

For accompanying spouse or child: _____

OTHER EXPENSES (specify):

For Member or Officer: ∅

For accompanying spouse or child: _____

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: Roy Blunt

DATE: _____

Version date 1/2001

LEGISLATIVE RESOURCE CENTER
2003 MAR 25 PM 12: 34
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

☐ *Original* ☐ *Amendment*

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

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NAME OF MEMBER OR OFFICER (PRINT OR TYPE): Roy Blunt

NAME OF ACCOMPANYING FAMILY MEMBER (if any): X N/A

RELATIONSHIP TO MEMBER/OFFICER (check one): ____ spouse ____ child

DATES OF TRAVEL: March 24

DATES AT PERSONAL EXPENSE: ____

ITINERARY: ____

SPONSOR (WHO PAID FOR THE TRIP): Dairy Farmers of America

PURPOSE OF TRIP: Speak to annual meeting

TOTAL TRANSPORTATION EXPENSES:

For Member or Officer: $1679.48

For accompanying spouse or child: ____

TOTAL LODGING EXPENSES:

For Member or Officer: ϕ

For accompanying spouse or child: ____

TOTAL MEAL EXPENSES:

For Member or Officer: $33.21

For accompanying spouse or child: ____

OTHER EXPENSES (specify):

For Member or Officer: ϕ

For accompanying spouse or child: ____

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: Roy Blunt

DATE: ____

Version date 1/2001

LEGISLATIVE RESOURCE CENTER
2003 MAY 14 PM 1:39
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

☐ *Original* ☐ *Amendment*

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

NAME OF MEMBER OR OFFICER (PRINT OR TYPE): ROY BLUNT

NAME OF ACCOMPANYING FAMILY MEMBER (if any): _____

RELATIONSHIP TO MEMBER/OFFICER (check one): ____ spouse ____ child

DATES OF TRAVEL: February 6-9

DATES AT PERSONAL EXPENSE: _____

ITINERARY: Republican Planning

SPONSOR (WHO PAID FOR THE TRIP): Congressional Institute

PURPOSE OF TRIP: Republican Planning Retreat

TOTAL TRANSPORTATION EXPENSES:

For Member or Officer: $120

For accompanying spouse or child: _____

TOTAL LODGING EXPENSES:

For Member or Officer: $739

For accompanying spouse or child: _____

TOTAL MEAL EXPENSES:

For Member or Officer: included in lodging

For accompanying spouse or child: _____

OTHER EXPENSES (specify):

For Member or Officer: $355

For accompanying spouse or child: _____

LEGISLATIVE RESOURCE CENTER
2003 MAY 14 PM 1:39
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: Roy Blunt

DATE: _____

Version date 1/2001

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 2:51
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

(9)

SHERWOOD BOEHLERT
(Full Name)

2246 RAYBURN HOUSE OFFICE BLDG 202/225-3665
(Mailing Address) Daytime Telephone

WASHINGTON, DC 20515

Filer Status	☒ Member of the U.S. House of Representatives	State: District:	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sherwood Boehlert	5-17-04

Name	SHERWOOD BOEHLERT	Page 1 of [illegible]

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
FRIENDS OF SHERWOOD BOEHLERT	SPOUSE SALARY	56,000

For payments to charity in lieu of honoraria, use Schedule II.

Name SHERWOOD BOEHLERT | Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
ALONE-SE			
NEW YORK CHIROPRACTIC COLLEGE	SPEECH	DEC. 20 2003	$700
(HONORARIUM DIRECTED TO UTICA COLLEGE			
SCHOLARSHIP FUND)			

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Name SHERWOOD BOEHLERT | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP	Examples: SP Mega Corp Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
JT	NBT				X									X										X								
JT	MEDTRONIC			X										X								X										
SP	NEW ECONOMY (IRA)				X																											
	NEW ECONOMY (IRA)				X																											
JT	CISCO			X																												
JT	SUN MICROSYSTEMS		X																		X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name SHERWOOD BOEHLERT

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	ORACLE		X									X						
JT	PUTNAM CAPITAL APPRECIATION FUND		X					X					X					
JT	PUTNAM INT'L GROWTH		X					X					X					
JT	PUTNAM INT'L GROWTH & INCOME		X					X					X					
JT	PUTNAM VOYAGER		X					X					X					

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ~~$1,001–$15,000~~	C $15,001–$50,000	D ~~$50,001–$100,000~~	E $100,001–$250,000	F ~~$250,001–$500,000~~	G $500,001–$1,000,000	H ~~$1,000,001–$5,000,000~~	I $5,000,001–$25,000,000	J ~~$25,000,001–$50,000,000~~	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	NONE														

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Name SHERWOOD BOEHLERT | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	NONE						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NONE						

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 2004 91-610 (mac)

Use additional sheets if more space is required.

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LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 5:10

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A — For use by Members, officers, and employees

John Andrew Boehner
(Full Name)

7371 Charter Cup Lane West Chester, OH 45069
(Mailing Address)

202-225-6205
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: OH District: 08	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John A. Boehner	5/17/04

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SCHEDULE I - EARNED INCOME

Name John Andrew Boehner

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Sibcy Cline Real Estate	Spouse commissions	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Andrew Boehner

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Nucite Sales, Inc.	$15,001 - $50,000	Dividends	$5,001 - $15,000	N/A
Nucite Sales, Inc. Pension Plan Trust	$500,001 - $1,000,000	N/A	NONE	N/A
State of Ohio-Deferred Compensation Plan	$100,001 - $250,000	N/A	NONE	N/A
State of Ohio, Public Employee Retirement System	$15,001 - $50,000	N/A	NONE	N/A
Wright Patman Congressional Federal Credit Union	$100,001 - $250,000	Interest	$1,000-$2,500	N/A
First Financial Bank	$1,001 - $15,000	Interest	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Andrew Boehner

	American Funds Euro Pacific	$50,001 - $100,000	N/A	NONE	S
	American Funds Small Cap World Fund	$15,001 - $50,000	N/A	NONE	S
	Victory Small Co. Opportunity Mutual Fund	$15,001 - $50,000	N/A	NONE	
	Victory Diversified Fund	$50,001 - $100,000	Dividends	$1,000-$2,500	
	Ohio Municipal Cash Trust	$1,001 - $15,000	Dividends	$1 - $200	
	Growth Fund of America	$50,001 - $100,000	N/A	NONE	
	Lord Abbett Mid Cap	$15,001 - $50,000	Dividends	$1 - $200	
	Calomus Growth and Inc.	$15,001 - $50,000	N/A	NONE	P
	First Financial Bank Corp.	$1001-$15,000	Dividends	$1 - $200	
	Rolling Ridge Association	$1001-$15,000	Dividends	$201 - $1,000	
	7908 Cincinnati-Dayton Road/Suite 1	$100,001 - $250,000	Rent	$15,001 - $50,000	
	Farm Property- Pantego, N.C.	$1001-$15,000	Rent	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name John Andrew Boehner

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	American Funds Europacific Fund	S	01-10-03	$15,001 - $50,000
	American Funds Small Cap Fund	S	01-10-03	$1,001 - $15,000
	Calamus Growth and Income	P	01-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John Andrew Boehner

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Sallie Mae Foundation	01-13-03--01-15-03	Wash., D.C.--West Palm Beach, FL	Y	Y	N	None
Chicago Board of Trade	03-13-03---03-16-03	Wash., D.C.--West Palm Beach, FL--Wash., D.C.	Y	Y	Y	None
CSX Corporation	05-23-03--05-26-03	Wash., D.C.--Lewisburg, WV--Columbus, OH	Y	Y	Y	None
Citigroup	09-12-03--09-14-03	Wash., D.C.--West Palm Beach, FL--Wash., D.C.	Y	Y	N	None
Cigar Association of America	10-03-03-10-05-03	Wash., D.C.--Hot Springs, VA--Wash., D.C.	Y	Y	Y	None

SCHEDULE VIII - POSITIONS

Name John Andrew Boehner

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Officer-Non Comp.	Nucite Sales, Inc
Limited Partner	Nucite Sales LP
Limited Partner	Rolling Ridge Associates

SCHEDULE IX - AGREEMENTS

Name John Andrew Boehner

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A	Nucite Sales, Inc Pension Plan and Profit Sharing Plans	Continued interest, no additional contribution
N/A	State of Ohio Pension and Deferred Compensation Plans	Continued interest, no additional contribution
N/A	Nucite Sales, LP	Limited Partnership

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

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(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

MC

John Andrew Boehner
(Full Name)

7371 Charter Cup Lane West Chester, OH 45069
(Mailing Address)

202-225-6205
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representative — State: OH, District: 08	☐ Officer Or Employee	Employing Office
Report Type	☐ Annual (May 15)	☑ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts–	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	John A. Boehner	6-4-04

SCHEDULE I - EARNED INCOME

Name John Andrew Boehner

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Sibcy Cline Real Estate	Spouse commissions	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Andrew Boehner

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Nucite Sales, Inc.	$15,001 - $50,000	Dividends	$5,001 - $15,000	N/A
	Nucite Sales, Inc. Pension Plan Trust	$500,001 - $1,000,000	N/A	NONE	N/A
	Nucite Sales, Inc. Profit Sharing Trust	$500,001 - $1,000,000	N/A	N/A	N/A
	State of Ohio-Deferred Compensation Plan	$100,001 - $250,000	N/A	NONE	N/A
	State of Ohio, Public Employee Retirement System	$15,001 - $50,000	N/A	NONE	N/A
	Wright Patman Congressional Federal Credit Union	$100,001 - $250,000	Interest	$1,000-$2,500	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Andrew Boehrer

	First Financial Bank	$1,001 - $15,000	Interest	$1 - $200	
	American Funds Euro Pacific	$50,001 - $100,000	N/A	NONE	S
	American Funds Small Cap World Fund	$15,001 - $50,000	N/A	NONE	S
	Victory Small Co. Opportunity Mutual Fund	$15,001 - $50,000	N/A	NONE	
	Victory Diversified Fund	$50,001 - $100,000	Dividends	$1,000-$2,500	
	Ohio Municipal Cash Trust	$1,001 - $15,000	Dividends	$1 - $200	
	Growth Fund of America	$50,001 - $100,000	N/A	NONE	
	Lord Abbett Mid Cap	$15,001 - $50,000	Dividends	$1 - $200	
	Calomus Growth and Inc.	$15,001 - $50,000	N/A	NONE	P
	First Financial Bank Corp.	$1001-$15,000	Dividends	$1 - $200	
	Rolling Ridge Associates, Real Estate Limited Partnership, Owns Rolling Ridge Apts. Montana Avenue Cincinnati, OH	$1001-$15,000	Dividends	$201 - $1,000	
	7908 Cincinnati-Dayton Road/Suite 1 West Chester, OH (office Building)	$100,001 - $250,000	Rent	$15,001 - $50,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Andrew Boehner

	Farm Property- Pantego, N.C.	$1001-$15,000	Rent	$201 - $1,000	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John Andrew Boehner

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Sallie Mae Foundation	01-13-03--01-15-03	Wash., D.C.--West Palm Beach, FL	Y	Y	N	None
Chicago Board of Trade	03-13-03---03-16-03	Wash., D.C.--West Palm Beach, FL--Wash., D.C.	Y	Y	Y	None
CSX Corporation	05-23-03--05-26-03	Wash., D.C.--Lewisburg, WV--Columbus, OH	Y	Y	Y	None
Citigroup	09-12-03--09-14-03	Wash., D.C.--West Palm Beach, FL--Wash., D.C.	Y	Y	N	None
Cigar Association of America	10-03-03-10-05-03	Wash., D.C.--Hot Springs, VA--Wash., D.C.	Y	Y	Y	None

SCHEDULE VIII - POSITIONS

Name John Andrew Boehner

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Officer-Non Comp.	Nucite Sales, Inc
Limited Partner	Nucite Sales LP
Limited Partner	Rolling Ridge Associates

SCHEDULE IX - AGREEMENTS

Name John Andrew Boehner

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A	Nucite Sales, Inc Pension Plan and Profit Sharing Plans	Continued interest, no additional contribution
N/A	State of Ohio Pension and Deferred Compensation Plans	Continued interest, no additional contribution
N/A	Nucite Sales, LP	Limited Partnership

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(Office Use Only)

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Henry Bonilla
(Full Name)

2458 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-4511
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: TX District: 23	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ✓
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ✓	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐	No ✓
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ✓

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ✓
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ✓

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	[signature]	5-13-04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry Bonilla

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	USAA Income Stock Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	USAA Federal Savings Bank	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	USAA Life Insurance Company	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
	Apollo Group Inc Cl A	None	CAPITAL GAINS	$2,501 - $5,000	S
	Boston Scientific Corp	None	CAPITAL GAINS	$2,501 - $5,000	S
	Comcast Crp New Cl A Spl	None	CAPITAL GAINS	$5,001 - $15,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry Bonilla

	Caremark Rx Inc	None	CAPITAL GAINS	$2,501 - $5,000	S
	Forest Labs Inc	None	CAPITAL GAINS	$2,501 - $5,000	S
	Garmin Ltd (Kayman Is)	None	CAPITAL GAINS	$2,501 - $5,000	S
	St. Jude Medical Inc	None	CAPITAL GAINS	$5,001 - $15,000	S
	Stericycle Inc Com	None	CAPITAL GAINS	$2,501 - $5,000	S
	Zimmer Holdings Inc Com	None	CAPITAL GAINS	$1,001 - $2,500	S
	Harte-Hanks Inc Del	$15,001 - $50,000	DIVIDENDS	NONE	
	ML Media Partners	None	CAPITAL GAINS	$2,501 - $5,000	S
DC	Alexandria Real Est Eqts	None	CAPITAL GAINS	$201 - $1,000	S
DC	CBL & Assoc Pptys Inc	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
DC	Essex Ppty Tr Inc Com	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
DC	Hospitality Pptys Trust	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
DC	Public Storage Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Vornado Realty Trust Com	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry Bonilla

DC	Ventas Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Eastgroup Properties Inc	None	DIVIDENDS	$201 - $1,000	S
DC	Harte-Hanks Inc Del	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Othodontic Ctrs Inc	$1,001 - $15,000	DIVIDENDS	NONE	
DC	Ventas Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Henry Bonilla

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Apollo Group Inc Cl A	S	08-21-03	$1,001 - $15,000
	Boston Scientific Corp	S	08-21-03	$1,001 - $15,000
	Comcast Crp New Cl A Spl	S	08-21-03	$1,001 - $15,000
	Caremark Rx Inc	S	08-21-03	$1,001 - $15,000
	Colgate Palmolive	S	08-21-03	$1,001 - $15,000
	Forest Labs Inc	S	08-21-03	$15,001 - $50,000
	Garmin Ltd (Kayman Is)	S	08-21-03	$1,001 - $15,000
	Idec Pharmctls Corp	S	08-21-03	$1,001 - $15,000
	Quest Diagnostics Inc	S	08-21-03	$1,001 - $15,000
	St. Jude Medical Inc	S	08-21-03	$1,001 - $15,000
	Stericycle Inc	S	08-21-03	$1,001 - $15,000
	Zimmer Holdings Inc	S	08-21-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Henry Bonilla

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	ML Media Partners	S	04-01-03	$1,001 - $15,000
DC	Alexandria Real Est Eqts	S	08-20-03	$15,001 - $50,000
DC	Eastgroup Properties Inc	S	03-21-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Henry Bonilla

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
AACI	02/02/03-02/03-03	San Antonio, TX--Ft. Myers, FL--Washington, DC	Y	Y	N	N/A
Toyota Motor Manufacturing North America	02/10/03	San Antonio, TX--Washington, DC	N	N	N	N/A
The Public Governance Institute	02/28/03-03/02/03	Washington, DC--White Sulphur Springs, VA--Washington, DC	Y	N	Y	N/A
AMI	12/05/03-12/08/03	Washington, DC--New York, NY--Washington, DC	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(Office Use Only)

Josiah Robins Bonner, Jr.
(Full Name)

143 Myrtlewood Lane Mobile, AL 36608
(Mailing Address)

202-225-4931
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: AL District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Josiah Robins Bonner Jr.	5-13-04

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Josiah Robins Bonner, Jr.

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
American Society of Anesthesiologists	speech	May 7, 2003	$1,500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Josiah Robins Bonner, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Camden National Bank	$1,001 - $15,000	INTEREST	$1 - $200	NA
	Federal Credit Union	$1 - $1,000	INTEREST	$1 - $200	NA
JT	Whitney National Bank	$1,001 - $15,000	INTEREST	$1 - $200	NA
	Pioneer Growth Shares	$1 - $1,000	NONE	NONE	NA
JT	2469 +/- Timberland, Wilcox County, Alabama	$1,000,001 - $5,000,000	rent, leases	$15,001 - $50,000	rent, leases
JT	First Gulf Bank	$1 - $1,000	INTEREST	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Josiah Robins Bonner, Jr.

	76 acres timberland, Wilcox County, Alabama	$100,001 - $250,000	NONE	NONE	NA
JT	Alabama PrePaid Tuition Plan - Lee Bonner	$1,001 - $15,000	NONE	NONE	NA
JT	Alabama Pre-Paid Tuition Plan - Robins Bonner	$1,001 - $15,000	NA	NONE	NA
JT	1st Camden Bankshares	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	NA
JT	Town and Country National Bank	$50,001 - $100,000	INTEREST	$201 - $1,000	NA
JT	RMA Money Market	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
JT	MFS Emerging Growth	$50,001 - $100,000	NONE	NONE	NA
JT	Oppenheimer Main Street	$1,001 - $15,000	NONE	NONE	NA
JT	Oppenheimer Growth	$1,001 - $15,000	NONE	NONE	NA
JT	Pioneer Growth Shares	$15,001 - $50,000	NONE	NONE	NA
JT	MFS Emerging Growth	None	CAPITAL GAINS	$5,001 - $15,000	S
	2-11 acre lots, Baldwin County, Alabama	$15,001 - $50,000	NONE	NONE	NA
SP	Cisco	$1,001 - $15,000	NONE	NONE	NA
SP	Fannie Mae	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Josiah Robins Bonner, Jr.

SP	Health South	$1 - $1,000	NONE	NONE	NA
SP	Mirant	$1 - $1,000	NONE	NONE	NA
SP	Southern Company	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
SP	John Hancock Financial	$15,001 - $50,000	DIVIDENDS	$1 - $200	NA
SP	Pioneer Growth	$15,001 - $50,000	DIVIDENDS	$1 - $200	NA
DC	Cisco	$1,001 - $15,000	NONE	NONE	NA
DC	EMC	None	CAPITAL GAINS	$201 - $1,000	S
DC	Coca-Cola	$1 - $1,000	DIVIDENDS	$1 - $200	NA
DC	Fannie Mae	$1 - $1,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	S
DC	Intel	$1,001 - $15,000	DIVIDENDS	$1 - $200	NA
DC	Oracle	None	CAPITAL GAINS	$201 - $1,000	S
DC	Nokia	None	CAPITAL GAINS	$201 - $1,000	S
DC	Sun Microsystems	None	CAPITAL GAINS	$1 - $200	S
DC	Weyerhauser	$1 - $1,000	DIVIDENDS	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Josiah Robins Bonner, Jr.

DC	MFS Emerging Growth	None	CAPITAL GAINS	$1,001 - $2,500	S
DC	Texas Instruments	$1 - $1,000	DIVIDENDS	$1 - $200	NA

SCHEDULE IV - TRANSACTIONS

Name Josiah Robins Bonner, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	2469 +/- Timberland, Wilcox County, Alabama	Other	Fall 2003	$15,001 - $50,000
JT	MFS Emerging Growth	S	8-18-03 10-10-03	$15,001 - $50,000
DC	Fannie Mae	S	10-07-03	$1,001 - $15,000
DC`	MFS Emerging Growth	S	1-06-03	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Josiah Robins Bonner, Jr.

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Camden National Bank	Unsecured personal loan for campaign	$50,001 - $100,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 17 PM 3:47

(Office Use Only) MC

Mary Bono
(Full Name)

64505 Via Amante Palm Springs, CA 92264 (202) 225-5330
(Mailing Address) Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 45	[ ] Officer or Employee	Employing Office: HR MEMBER SERVICES
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
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V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mary Bono	05/13/04

SCHEDULE I - EARNED INCOME

Name MARY BONO

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
AFTRA RETIREMENT FUND	PENSION	$9,429
AFTRA RETIREMENT FUND	PENSION	$6,024

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARY BONO

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
UNION BANK OF CALIFORNIA	$1,001 - $15,000	INTEREST	$201 - $1,000	
MERRILL LYNCH BANK DEPOSIT PROGRAM	None	INTEREST	$1 - $200	
MERRILL LYNCH CMA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
MERRILL LYNCH EQUITIES	$250,001 - $500,000	DIVIDENDS	$2,501 - $5,000	
MERRILL LYNCH CMA	$1,001 - $15,000	INTEREST	NONE	
UNION BANK OF CALIFORNIA	$15,001 - $50,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARY BONO

FEDERAL HOME LOAN BANK GLOBAL BONDS	None	INTEREST	$201 - $1,000	
MERRILL LYNCH CMA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
FEDERAL FARM CREDIT BANK BONDS	$15,001 - $50,000	INTEREST	NONE	P
MERRILL LYNCH EQUITIES	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
FEDERAL HOME LOAN MTG CORP NOTES	None	INTEREST	$201 - $1,000	S
FEDERAL HOME LOAN BANK	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
FEDERAL HOME LOAN MORTGAGE-IRA	$15,001 - $50,000	INTEREST	$201 - $1,000	
US TREASURY STRIPS	$15,001 - $50,000	PAID ON MATURITY	PAID ON MATURITY	
MERRILL LYNCH CMA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
WARNER MUSIC GROUP	$15,001 - $50,000	ROYALTIES	$5,001 - $15,000	
SOUNDEXCHANGE	$1 - $1,000	ROYALTIES	$1 - $200	
BONO COLLECTION TRUST	$250,001 - $500,000	ROYALTIES & INTEREST	$100,001 - $1,000,000	
ML EQUITIES-IRA	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
FINANCING CORP-IRA	$50,001 - $100,000	PAID ON MATURITY	PAID ON MATURITY	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARY BONO

ML-RR CL 1-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
ML BANK DEPOSIT PROGRAM	$1 - $1,000	INTEREST	NONE	
FEDERAL HOME LOAN MORTGAGE	None	INTEREST	$201 - $1,000	
CENTRAL VALLEY SCH DISTS BOND, 6.25%	$50,001 - $100,000	INTEREST	NONE	
SAN FRANCISCO CA ST BLG BOND, 5.1%	None	INTEREST	$201 - $1,000	S
CALIFORNIA ST PRIN MTIGR SER K BOND, 7%	$15,001 - $50,000	INTEREST	$201 - $1,000	
MERRILL LYNCH-OID	None	INTEREST	$1,001 - $2,500	
MERRILL LYNCH CMA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
ISHARES	$1 - $1,000	DIVIDENDS	$1 - $200	
MERRILL LYNCH CMA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
MERRILL LYNCH EQUITIES	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
FINANCING CORP. STRIPS	$15,001 - $50,000	PAID ON MATURITY	PAID ON MATURITY	
SOUNDEXCHANGE, INC.	$1 - $1,000	INTEREST	$1 - $200	
ISHARES	$1 - $1,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MARY BONO

FEDERAL HOME LOAN BANK	$15,001 - $50,000	INTEREST	$1,001 - $2,500
UNION BANK OF CALIFORNIA	$50,001 - $100,000	INTEREST	$201 - $1,000
WARNER MUSIC GROUP	$15,001 - $50,000	ROYALTIES	$2,501 - $5,000
BONO COLLECTION TRUST	$100,001 - $250,000	ROYALTIES & INTEREST	$50,001 - $100,000
SOUNDEXCHANGE, INC.	$1 - $1,000	ROYALTIES	$1 - $200
BONO COLLECTION TRUST	$100,001 - $250,000	ROYALTIES & INTEREST	$50,001 - $100,000
WARNER MUSIC GROUP CORP	$15,001 - $50,000	ROYALTIES	$2,501 - $5,000
ML BANK DEPOSIT PROGRAM	$1 - $1,000	INTEREST	NONE
ESTATE OF SONNY BONO	$0	OTHER INCOME	$201 - $1,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	APPLIED MATERIAL INC.	P	04-02-03	$1,001 - $15,000
	APPLIED MATERIAL INC.	P	06-16-03	$1,001 - $15,000
	BURLINGTON N SNTA	P	07-30-03	$1,001 - $15,000
	BECKMAN COULTER INC.	P	08-06-03	$1,001 - $15,000
	COMCAST CRP	P	05-22-03	$1,001 - $15,000
	CISCO SYSTEMS INC.	P	04-02-03	$1,001 - $15,000
	CONAGRA FOODS INC	P	06-16-03	$1,001 - $15,000
	DOMINION RES INC	P	02-25-03	$1,001 - $15,000
	DOMINION RES INC	P	07-30-03	$1,001 - $15,000
	LOWES CO	P	05-22-03	$1,001 - $15,000
	MCKESSON CORP.	P	09-08-03	$1,001 - $15,000
	MBIA INC	P	07-22-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	METRONIC INC	P	10-28-03	$1,001 - $15,000
	PERFORMANCE FOOD GROUP	P	06-16-03	$1,001 - $15,000
	QUEST DIAGNOSTICS	P	10-01-03	$1,001 - $15,000
	UNITEDHEALTH GROUP	P	02-25-03	$1,001 - $15,000
	WALGREEN CO	P	04-11-03	$1,001 - $15,000
	WALGREEN CO	P	06-16-03	$1,001 - $15,000
	APPLIED MATERIAL INC-IRA	P	04-02-03	$1,001 - $15,000
	BURLINGTON N SNTA-IRA	P	07-30-03	$1,001 - $15,000
	BECKMAN COULTER INC-IRA	P	08-06-03	$1,001 - $15,000
	COMCAST CRP-IRA	P	05-22-03	$1,001 - $15,000
	DOMINION RES INC-IRA	P	02-25-03	$1,001 - $15,000
	DOMINION RES INC-IRA	P	07-30-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	LOWES CO-IRA	P	05-22-03	$1,001 - $15,000
	MCKESSON CORP-IRA	P	09-08-03	$1,001 - $15,000
	MBIA INC-IRA	P	07-22-03	$1,001 - $15,000
	MEDTRONIC INC-IRA	P	10-28-03	$1,001 - $15,000
	QUEST DIAGNOSTICS-IRA	P	10-01-03	$1,001 - $15,000
	UNITEDHEALTH GROUP-IRA	P	02-25-03	$1,001 - $15,000
	WALGREEN CO-IRA	P	04-11-03	$1,001 - $15,000
	ALCOA INC	P	09-08-03	$1,001 - $15,000
	AMER INTL GROUP	P	09-08-03	$1,001 - $15,000
	APPLIED MATERIAL INC	P	04-02-03	$1,001 - $15,000
	APPLIED MATERIAL INC	P	09-08-03	$1,001 - $15,000
	BURLINGTON N SNTA	P	07-30-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	BECKMAN COULTER INC	P	08-06-03	$1,001 - $15,000
	BECKMAN COULTER INC	P	09-08-03	$1,001 - $15,000
	COMCAST CRP	P	09-08-03	$1,001 - $15,000
	CISCO SYSTEMS INC	P	09-08-03	$1,001 - $15,000
	CONAGRA FOODS INC	P	09-08-03	$1,001 - $15,000
	DOMINION RES INC	P	02-25-03	$1,001 - $15,000
	DOMINION RES INC	P	09-08-03	$1,001 - $15,000
	EXXON MOBIL	P	09-08-03	$1,001 - $15,000
	FIRST DATA CORP.	P	09-08-03	$1,001 - $15,000
	GALLAGHER ARTHUR J & CO	P	09-08-03	$1,001 - $15,000
	HEALTH CARE PPTY	P	09-08-03	$1,001 - $15,000
	IBM	P	09-08-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	L-3 COMMUNICATIONS	P	09-08-03	$1,001 - $15,000
	LOWES CO.	P	05-22-03	$1,001 - $15,000
	MCKESSON CORP.	P	09-08-03	$1,001 - $15,000
	MBIA INC.	P	07-22-03	$1,001 - $15,000
	MBIA INC.	P	09-08-03	$1,001 - $15,000
	MEDTRONIC INC.	P	10-28-03	$1,001 - $15,000
	PERFORMANCE FOOD GROUP	P	06-16-03	$1,001 - $15,000
	PERFORMANCE FOOD GROUP	P	09-08-03	$1,001 - $15,000
	QUEST DIAGNOSTICS	P	10-01-03	$1,001 - $15,000
	SOUTHWEST AIRLINES	P	09-08-03	$1,001 - $15,000
	UNITEDHEALTH GROUP	P	02-25-03	$1,001 - $15,000
	VIACOM INC. CL B	P	09-08-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	WALGREEN CO	P	04-11-03	$1,001 - $15,000
	WALGREEN CO	P	09-08-03	$1,001 - $15,000
	ALCOA INC	P	09-08-03	$1,001 - $15,000
	AMER INTL GROUP	P	09-08-03	$1,001 - $15,000
	APPLIED MATERIAL INC	P	04-02-03	$1,001 - $15,000
	APPLIED MATERIAL INC	P	06-16-03	$1,001 - $15,000
	APPLIED MATERIAL INC	P	09-08-03	$1,001 - $15,000
	BURLINGTON N SNTA	P	07-30-03	$1,001 - $15,000
	BURLINGTON N SNTA	P	09-08-03	$1,001 - $15,000
	BECKMAN COULTER	P	08-06-03	$1,001 - $15,000
	BECKMAN COULTER	P	09-08-03	$1,001 - $15,000
	COMCAST CRP	P	05-22-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	COMCAST CRP	P	09-08-03	$1,001 - $15,000
	COSTCO	P	09-08-03	$1,001 - $15,000
	CISCO SYSTEMS	P	09-08-03	$1,001 - $15,000
	CONAGRA FOODS INC	P	09-08-03	$1,001 - $15,000
	DOMINION RES INC	P	02-25-03	$1,001 - $15,000
	DOMINION RES INC	P	09-08-03	$1,001 - $15,000
	EXXON MOBIL	P	09-08-03	$1,001 - $15,000
	FIRST DATA CORP.	P	09-08-03	$1,001 - $15,000
	FIRST DATA CORP.	P	10-28-03	$1,001 - $15,000
	GALLAGHER ARTHUR J & CO	P	09-08-03	$1,001 - $15,000
	HEALTH CARE PPTY	P	09-08-03	$1,001 - $15,000
	IBM	P	09-08-03	$1,001 - $15,000

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	L-3 COMMUNICATIONS	P	09-08-03	$1,001 - $15,000
	LOWES CO	P	05-22-03	$1,001 - $15,000
	LOWES CO	P	09-09-03	$1,001 - $15,000
	MCKESSON CORP.	P	09-08-03	$1,001 - $15,000
	MBIA INC	P	07-22-03	$1,001 - $15,000
	MBIA INC	P	09-08-03	$1,001 - $15,000
	METRONIC INC	P	10-28-03	$1,001 - $15,000
	PERFORMANCE FOOD GROUP	P	06-16-03	$1,001 - $15,000
	PERFORMANCE FOOD GROUP	P	09-08-03	$1,001 - $15,000
	QUEST DIAGNOSTICS	P	10-01-03	$1,001 - $15,000
	SOUTHWEST AIRLINES	P	09-08-03	$1,001 - $15,000
	UNITEDHEALTH GROUP	P	02-25-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	UNITEDHEALTH GROUP	P	09-08-03	$1,001 - $15,000
	VIACOM INC CL B	P	09-08-03	$1,001 - $15,000
	WALGREEN CO	P	04-11-03	$1,001 - $15,000
	WALGREEN CO	P	09-08-03	$1,001 - $15,000
	ALLERGAN INC	S	02-25-03	$1,001 - $15,000
	ALLERGAN INC	S	04-01-03	$1,001 - $15,000
	APPLIED MATERIAL INC	S	10-28-03	$1,001 - $15,000
	FIRST DATA CORP.	S	06-16-03	$1,001 - $15,000
	CALIFORNIA ST	S	10-16-03	$1,001 - $15,000
	CALIFORNIA ST	S	05-20-03	$1,001 - $15,000
	GENENTECH	S	05-19-03	$1,001 - $15,000
	GENENTECH	S	05-19-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	GENENTECH	S	06-16-03	$1,001 - $15,000
	STERICYCLE	S	04-08-03	$1,001 - $15,000
	PITNEY BOWES	S	02-25-03	$1,001 - $15,000
	CALIFORNIA ST	S	07-22-03	$1,001 - $15,000
	SAN FRANCISCO CA	S	09-12-03	$15,001 - $50,000
	CALIFORNIA ST	S	01-16-03	$15,001 - $50,000
	ADVANCEPCS	S	07-22-03	$1,001 - $15,000
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000
	CISCO SYSTEMS	S	10-28-03	$1,001 - $15,000
	GENENTECH	S	07-30-03	$1,001 - $15,000
	GENENTECH	S	09-24-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	IBM	S	10-28-03	$1,001 - $15,000
	JOHNSON & JOHNSON	S	08-05-03	$1,001 - $15,000
	LOWES CO	S	10-28-03	$1,001 - $15,000
	SOUTHWEST AIRLINES	S	07-22-03	$1,001 - $15,000
	PITNEY BOWES	S	07-30-03	$1,001 - $15,000
	ALLERGAN	S	02-25-03	$1,001 - $15,000
	ALLERGAN	S	04-01-03	$1,001 - $15,000
	APPLIED MATERIAL	S	10-28-03	$1,001 - $15,000
	FIRST DATA CORP.	S	06-16-03	$1,001 - $15,000
	LOS ANGELES CNTY CA	S	05-01-03	$1,001 - $15,000
	ADVANCEPCS	S	07-22-03	$1,001 - $15,000
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000
	GENENTECH	S	05-19-03	$1,001 - $15,000
	GENENTECH	S	05-19-03	$1,001 - $15,000
	GENENTECH	S	06-16-03	$1,001 - $15,000
	STERICYCLE	S	04-08-03	$1,001 - $15,000
	GENENTECH	S	09-24-03	$1,001 - $15,000
	PITNEY BOWES	S	02-25-03	$1,001 - $15,000
	CISCO SYSTEMS	S	10-28-03	$1,001 - $15,000
	GENENTECH	S	09-24-03	$1,001 - $15,000
	IBM	S	10-28-03	$1,001 - $15,000
	JOHNSON & JOHNSON	S	08-05-03	$1,001 - $15,000
	SOUTHWEST AIRLINES	S	07-22-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	FEDERAL HOME LOAN MTG	S	02-18-03	$1,001 - $15,000
	PITNEY BOWES	S	07-30-03	$1,001 - $15,000
	US TSY STRIPS	S	10-14-03	$1,001 - $15,000
	ALLERGAN	S	02-25-03	$1,001 - $15,000
	ALLERGAN	S	04-01-03	$1,001 - $15,000
	APPLIED MATERIAL	S	10-28-03	$1,001 - $15,000
	FIRST DATA CORP.	S	06-16-03	$1,001 - $15,000
	FEDERAL HOME LOAN MTG	S	11-12-03	$15,001 - $50,000
	FEDERAL HOME LOAN BANK	S	10-15-03	$15,001 - $50,000
	ADVANCEPCS	S	07-22-03	$1,001 - $15,000
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000
	GENENTECH	S	05-19-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	GENENTECH	S	05-19-03	$1,001 - $15,000
	GENENTECH	S	06-16-03	$1,001 - $15,000
	STERICYCLE	S	04-08-03	$1,001 - $15,000
	PITNEY BOWES	S	02-25-03	$1,001 - $15,000
	ADVANCEPCS	S	09-03-03	$1,001 - $15,000
	GENENTECH	S	09-24-03	$1,001 - $15,000
	IBM	S	10-28-03	$1,001 - $15,000
	JOHNSON & JOHNSON	S	08-05-03	$1,001 - $15,000
	SOUTHWEST AIRLINES	S	07-22-03	$1,001 - $15,000
	FEDERAL HOME LOAN MTG	S	02-18-03	$1,001 - $15,000
	PITNEY BOWES	S	07-30-03	$1,001 - $15,000
	FEDERAL HOME LOAN BANK BONDS-IRA	P	06-25-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	APPLIED MATERIAL INC-IRA	P	04-02-03	$1,001 - $15,000
	BURLINGTON N SNTA-IRA	P	07-30-03	$1,001 - $15,000
	BECKMAN COULTER-IRA	P	08-06-03	$1,001 - $15,000
	COMCAST CRP NEW CL A-IRA	P	05-22-03	$1,001 - $15,000
	DOMINION RES INC-IRA	P	02-25-03	$1,001 - $15,000
	DOMINION RES INC-IRA	P	07-30-03	$1,001 - $15,000
	LOWES CO.-IRA	P	05-22-03	$1,001 - $15,000
	MCKESSON CORP-IRA	P	09-08-03	$1,001 - $15,000
	MBIA INC-IRA	P	07-22-03	$1,001 - $15,000
	MEDTRONIC INC-IRA	P	10-28-03	$1,001 - $15,000
	QUEST DIAGNOSTICS-IRA	P	10-01-03	$1,001 - $15,000
	UNITEDHEALTH GROUP INC-IRA	P	02-25-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	WALGREEN CO	P	04-11-03	$1,001 - $15,000
	ALLERGAN INC-IRA	S	02-28-03	$1,001 - $15,000
	PITNEY BOWES-IRA	S	02-28-03	$1,001 - $15,000
	ALLERGAN INC-IRA	S	04-04-03	$1,001 - $15,000
	STERICYCLE-IRA	S	04-11-03	$1,001 - $15,000
	GENENTECH-IRA	S	05-22-03	$1,001 - $15,000
	GENENTECH-IRA	S	05-22-03	$1,001 - $15,000
	FIRST DATA CORP-IRA	S	06-19-03	$1,001 - $15,000
	GENENTECH-IRA	S	06-19-03	$1,001 - $15,000
	ADVANCEPCS-IRA	S	07-25-03	$1,001 - $15,000
	SOUTHWEST AIRLINES-IRA	S	07-25-03	$1,001 - $15,000
	GENENTECH-IRA	S	08-04-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name MARY BONO

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transactio
	PITNEY BOWES-IRA	S	08-04-03	$1,001 - $15,000
	JOHNSON & JOHNSON-IRA	S	08-08-03	$1,001 - $15,000
	ADVANCEPCS-IRA	S	09-08-03	$1,001 - $15,000
	FINANCING CORP COUPON STRIPS-IRA	S	09-08-03	$15,001 - $50,000
	GENENTECH-IRA	S	09-29-03	$1,001 - $15,000
	CISCO SYSTEMS-IRA	S	10-31-03	$1,001 - $15,000
	IBM-IRA	S	10-31-03	$1,001 - $15,000
	LOWES CO-IRA	S	10-31-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name MARY BONO

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
CALIFORNIA DELEGATION RETREAT	DEC 5-7		N	Y	Y	YES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(5) **INSIDE MAIL**

2004 MAY 28 AM 11:27

(Office Use Only) YES

JOHN N. BOOZMAN
(Full Name)

37 CHAMPIONS BLVD., ROGERS, AR 72758
(Mailing Address)

479-273-5099
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: AR District: 3 rd.	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Boozman	5/17/04

Name JOHN N. BOOZMAN

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source	Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	Transaction: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock		Indefinite	X				X			Royalties					X		P
	Simon & Schuster								X									
	1st Bank of Paducah, KY accounts																	
JT	NORTHWEST MUTUAL LIFE		X						X									
JT	ARKANSAS NATIONAL BANK		X						X									
JT	A.G. EDWARDS							X										
JT	ARVEST BANK		X						X									
JT	ARVEST TRUST (401K)										N/A							
JT	AIM S-T TREASURY		X						X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN N. BOOZMAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	ABG-GOVERNMENT BONDS								X				X					
JT	ABG-MUNI-BOND FUND								X					X				
JT	ABG-EQUITY FUND							X										
JT	AMERITRADE								X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	AMERICAN ISRAEL EDUCATION	AUG. 23-31	WASH., D.C.-ISRAEL-FAY., AR.	Y	Y	Y	N
	PUBLIC GOVERNANCE INSTITUTE	FEB. 28- MAR. 2	WASH.,D.C.-W. VIRGINIA	Y	Y	Y	N

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Name JOHN N. BOOZMAN

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10–12–03	X				
JT	ABG–GOV'T BOND FUND	X	VARIOUS					
JT	ABG–MUNI–BOND FUND	X	VARIOUS					
JT	ABG–EQUITY FUND	X	VARIOUS					

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(Office Use Only)

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page

Madeleine Z Bordallo
(Full Name)

427 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202 225 1188
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: GU District: AL	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Madeleine Z. Bordallo	5/17/04

SCHEDULE I - EARNED INCOME

Name Madeleine Z. Bordallo

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Government of Guam, Lieutenant Governor	Lieutenant Governor's Pension	$42,500
Government of Guam, Survivor's Benefit	Survivor's Benefit Pension	$20,225

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Madeleine Z. Bordallo

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
(Jonestown) 160 Trenton Blvd Tamuning, Guam 96912	$500,001 - $1,000,000	RENT	$50,001 - $100,000	
(Silver Meadow) 5747 NE 61st Street Marion County Ocala, FL 34479	$100,001 - $250,000	RENT	$5,001 - $15,000	
(Westbury) 5500 SW 30th Avenue Marion County Ocala, FL 34474	$500,001 - $1,000,000	RENT	$15,001 - $50,000	
Certificate of Deposit (1), Family Finance (matures on December 2004), Hagatna, Guam 96910	$15,001 - $50,000	INTEREST	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Madeleine Z. Bordallo

	Certificates of Deposit (4) Personal Finance Center (formerly dba Pacific Financial) Hagatna, Guam 96910	$100,001 - $250,000	INTEREST	$1,001 - $2,500	Cashed out
	Checking Account SunTrust Bank Ocala, FL	$15,001 - $50,000	INTEREST	$1 - $200	
	Checking Account "MZB Enterprise" Bank of Guam Hagatna, Guam 96910	$15,001 - $50,000	NONE	NONE	
	Checking Account Congressional Federal Credit Union	$15,001 - $50,000	INTEREST	$1 - $200	
	Undeveloped real property, Lot 20 Block 262, Willow Way, Marion County, Ocala, FL	$1,001 - $15,000	NONE	NONE	

SCHEDULE IV - TRANSACTIONS

Name Madeleine Z. Bordallo

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Certificates of Deposit (4) Personal Finance Center (formerly dba Pacific Financial) Hagatna, Guam 96910	S	10-24-03	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name Madeleine Z. Bordallo

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Bank of Guam Hagatna, Guam 96910	Mortgage on 160 Trenton Blvd (Tamuning rental home) Tamuning, Guam 96912	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Madeleine Z. Bordallo

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
American Israel Education Foundation	Aug 2 to Aug 10	Washington, D.C.--Tel Aviv--Washington, D.C.	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Madeleine Z. Bordallo

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
(Unpaid) Board of Directors	Latte of Freedom Foundation Hagatna, Guam 96910
(Unpaid) Board of Directors	R.J. Bordallo Foundation Hagatna, Guam 96910
(Unpaid) Advisor	Salvation Army of Guam Hagatna, Guam 96910

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 AM 9:09
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

MC

Leonard L. Boswell
(Full Name)

4323 Grand Ave #433 — 202 225 3806
(Mailing Address) — Daytime Telephone

Des Moines IA 50312

Filer Status: [X] Member of the U.S. House of Representatives — State: IA District: 03 — [ ] Officer or Employee — Employing Office:

Report Type: [ ] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[X]	[ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	[X]	[ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Leonard L Boswell	5-13-04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Clarke Community School	Spouse Salary	21,309.33
Graceland University	Spouse Salary	2266.00
State of Iowa	Legislative Pension	8360.78

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
SP	Mega Corp Stock	X (E)	X (DIVIDENDS)	X (IV)	P
DC	Simon & Schuster	Indefinite	Royalties	X (VI)	
JT	1st Bank of Paducah, KY accounts	X (F)	X (INTEREST)		
	Agricultural land (475 A) N. Buda/Burnell Township, Decatur Co. Ill	X (G)	N/A (CAPITAL GAINS)	N/A (V)	
	Farm Equipment	X (E)	N/A (CAPITAL GAINS)	N/A (V)	
	Lyrix Co (Cellular Tower)	N/A (F)	X (RENT)	X (V)	
	Breeding Stock (Cattle)	X (F)	Sale of calves	X (VIII)	
	South Central Coop	X (C)	X (DIVIDENDS)	X (II)	

Block B columns: A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000.

Block C columns: DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income).

Block D columns: I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000.

Block E columns: P, S, E.

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Leonard L. Boswell | Page 4 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	B $15,001–$50,000	C $50,001–$100,000	D $100,001–$250,000	E $250,001–$500,000	F $500,001–$1,000,000	G $1,000,001–$5,000,000	H $5,000,001–$25,000,000	I $25,000,001–$50,000,000	J Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Sale of calves		X					X							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			A $10,000 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Great Western Bank, Leon IA.	Mortgage on land Burrel Township, Decatur Co, IA		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Association of American Railroads	Apr 24-27	Wash., D.C - Pebble Beach - Wash., D.C	Y	Y	Y	N
	Greater Des Moines Partnership	May 16-20	Wash, D.C - Cuba - Wash., D.C	Y	Y	N	N
	CFSA Community Financial Services Assn of America	June 27-29	Wash., D.C. - Jackson Hole - Wash. D.C.	Y	Y	Y	N
	Microsoft	July 26-29	Wash., DC - Seattle - Des Moines	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(8)

2004 MAY 13 PM 3:06

MC

(Office Use Only)

Frederick C. Boucher
(Full Name)

2187 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-3861
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: VA, District: 09	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Frederick C. Boucher	May 13, 2004

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frederick C. Boucher

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Bank of America Checking Account	$1,001 - $15,000	INTEREST	$1 - $200	
Nations Securities Savings Account	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
Individual Retirement Account, Nations Securities	$15,001 - $50,000	DIVIDENDS/INTEREST	$1,001 - $2,500	
First Virginia Bank Preferred Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	E
Community National Bank Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	E
Vanguard S&P 500 Index Mutual Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frederick C. Boucher

	United Company Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	
	Rydex Over the Counter Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	Lot - Town of Damascus	$1,001 - $15,000		NONE	
	Lot - Washington County	$1 - $1,000		NONE	

SCHEDULE IV - TRANSACTIONS

Name Frederick C. Boucher

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	First Virginia Bank Preferred Stock exchanged for common stock of BB&T Financial	E	10/10/2003	$1,001 - $15,000
	Community National Bank common stock exchanged for common stock of South Financial Corporation	E	11/15/2003	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Frederick C. Boucher

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Please see attached - Page 5A			Y	Y	Y	

SCHEDULE VII
TRAVEL PAYMENTS AND REIMBURSEMENTS

Source	Dates	Point of Departure – Destination – Point of Return	Lodging	Food	Family Member Included	Any time not at sponsor's expense
Harvard Law School, for keynote speech to conference at law school on the legal rights of digital media consumers	3/14/03-3/15/03	Washington, DC – Cambridge, MA – Abingdon, VA	Yes	Yes	No	No
Federal Communications Bar Association, for speech to annual conference on prospects for the passage of legislation accelerating the digital television transition	5/3/03-5/4/03	Washington, DC – Hot Springs, VA – Abingdon, VA	Yes	Yes	No	No
Japan Center for International Exchange, for speech to forum on the prospects for the passage of comprehensive energy legislation	11/16/03-11/17/03	Bristol, TN – New York, NY – Washington, DC	Yes	Yes	No	No
California Energy Corporation, for roundtable discussion with company executives for prospects for passage of comprehensive energy legislation and field visit to geothermal electricity project	1/14/03-1/16/03	Abingdon,VA – Calpatria, CA – Washington, DC	Yes	Yes	No	No

Ripon Educational Foundation, for presentations to transatlantic conference on discriminatory effect of European Union value added tax on digital downloads supplied by American companies	8/10/03-8/14/03	Abingdon, VA – London – Abingdon, VA	Yes	Yes	No	6 days
Consumer Electronics Association, for speech to annual conference on prospects for the passage of legislation reaffirming fair use rights for the purchasers of digital media	1/9/03-1/11/03	Abingdon, VA – Las Vegas, NV – Abingdon, VA	Yes	Yes	No	No

SCHEDULE VIII - POSITIONS

Name Frederick C. Boucher

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member Board of Directors	First Virginia Bank - Mountain Empire (service terminated upon merger of bank with BBT Financial)
Member- Local Advisory Board of Directors	BBT Financial

RICK BOUCHER
9TH DISTRICT, VIRGINIA

COMMITTEES
ENERGY AND COMMERCE
SUBCOMMITTEES
TELECOMMUNICATIONS AND THE INTERNET
RANKING MEMBER
ENERGY AND AIR QUALITY

JUDICIARY
SUBCOMMITTEE
COURTS, THE INTERNET AND INTELLECTUAL PROPERTY

ASSISTANT WHIP

CO-CHAIR
CONGRESSIONAL INTERNET CAUCUS

Congress of the United States
House of Representatives

WASHINGTON OFFICE
2187 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-3861
e mail: NINTHNET@MAIL.HOUSE.GOV
WWW: http://www.house.gov/boucher/

CONSTITUENT SERVICE OFFICES
188 EAST MAIN STREET
ABINGDON, VIRGINIA 24210
(276) 628-1145

1 CLOVERLEAF SQUARE
SUITE C-1
BIG STONE GAP, VIRGINIA 24219
(276) 523-5450

106 NORTH WASHINGTON AVENUE
P.O. BOX 1268
PULASKI, VIRGINIA 24301
(540) 980-4370

June 3, 2004

MC 4

Mr. Jeff Trandahl
Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon HOB

Dear Mr. Trandahl:

I am enclosing amended Schedules III and IV to be substituted for the originally submitted Schedules III and IV for my annual financial disclosure form to be made public by your office in June.

I would appreciate your substituting the enclosed Schedules III and IV for the originally submitted Schedules III and IV.

Thanking you for your assistance, I am

Sincerely,

Rick Boucher
Member of Congress

RB/emw

HAND DELIVERED

2004 JUN -3 PM 12:29

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frederick C. Boucher

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
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3	First Virginia Bank Preferred Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	E
4	Community National Bank Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	E
5	Vanguard S&P 500 Index Mutual Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	
6	United Company Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frederick C. Boucher

7	Rydex Over the Counter Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
8	New River Funds Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
9	Individual Retirement Account, Nations Securities	$15,001 - $50,000	DIVIDENDS /INTEREST	$1,001 - $2,500	
10	Individual Holdings in Retirement Account (entries 10-16); King Pharmaceuticals Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
11	Jabil Circuit, Inc. Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
12	General Motors Corporation Class H Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
13	Echostar Communications Class A Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
14	Fidelity Select Developing Communications Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
15	Fidelity Select Technology Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
16	Rydex OTC Investor Class Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
17	Lot - Town of Damascus	$1,001 - $15,000		NONE	
18	Lot - Washington County	$1 - $1,000		NONE	

SCHEDULE IV - TRANSACTIONS

Name Frederick C. Boucher

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	First Virginia Bank Preferred Stock exchanged for common stock of BB&T Financial	E	10/10/2003	$1,001 - $15,000
	Community National Bank common stock exchanged for common stock of South Financial Corporation	E	11/15/2003	$1,001 - $15,000
	New River Funds Mutual Fund	P	11/20/2003	$1,001 - $15,000

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:30
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U.S. HOUSE OF REPRESENTATIVES
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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

F. Allen Boyd, Jr.
(Full Name)

4867 Ashville Highway Monticello, FL 32344
(Mailing Address)

202-225-5235
Daytime Telephone.

Filer Status: ☑ Member of the U.S. House of Representatives — State: FL District: 2 — ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) — ☐ Amendment — ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☑ No ☐
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	F. Allen Boyd, Jr.	5-17-04

SCHEDULE I - EARNED INCOME

Name F. Allen Boyd, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Florida Insurance Consultants	Spouse Commission	N/A
Boyd Family Farms	Spouse Management	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name F. Allen Boyd, Jr.

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
ABC Capital Bank	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
Capital City Bank	$100,001 - $250,000	D/DIVIDENDS	$2,501 - $5,000	
Boyd-Tuten Cattle Farm	$15,001 - $50,000	CAPITAL GAINS	NONE	
BCT Cotton Gin	$500,001 - $1,000,000	DIVIDENDS/RENT/INTEREST	$50,001 - $100,000	
Wright-Patman FCU	$50,001 - $100,000	INTEREST	$5,001 - $15,000	
Boyd Family Farms, Inc.	$500,001 - $1,000,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name F. Allen Boyd, Jr.

	Coastal Plains Farmers Group	$1,001 - $15,000	DIVIDENDS/INTEREST	$201 - $1,000	
	F.A. Boyd & Sons	$250,001 - $500,000	DIVIDENDS	NONE	
	FABJ Inc.	$1,001 - $15,000	DIVIDENDS	NONE	
	SEP-IRA/Janney Montgomery Scott	$50,001 - $100,000	DIVIDENDS	$1 - $200	
	Flyway Farm--Bright Proctor Road, Greenville, FL	$100,001 - $250,000	Other: Property	NONE	

SCHEDULE IV - TRANSACTIONS

Name F. Allen Boyd, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Flyway Farms	P	10-03	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name F. Allen Boyd, Jr.

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Farm Credit Service	Farm Loan	$500,001 - $1,000,000
	Farm Credit Service	Land Aquisition	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name F. Allen Boyd, Jr.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Dee Dot Timberlands	Nov. 7-9	Wash, D.C.--Jacksonville, FL	Y	Y	N	N/A
Dairy Farmers of America	Oct. 17-19	Wash, D.C.-South Dakota--Wash. D.C.	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name F. Allen Boyd, Jr.

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President and Majority Stockholder	Boyd Family Farms, Inc.
President	FABJ Inc.
Board Member	FA Boyd & Sons, Inc.
Board Member	Jefferson County Farm Bureau
Vice President	Boyd-Tuten Cattle Farm

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page

2004 MAY 13 AM 9:47

U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

MC

JOSEPH E. BRADLEY, III
(Full Name)

645 South Main Street Wolfeboro, NH 03894
(Mailing Address)

(202) 225-5456
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representative — State: NH — District: 01 — ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) — ☐ Amendment — ☐ Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? — Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? — Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? — Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? — Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? — Yes ☐ No ☑
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? — Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? — Yes ☐ No ☑
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? — Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? — Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/14/04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOSEPH E BRADLEY, III

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Wilmington Trust Co. - Trust	$1,000,001 - $5,000,000	DIVIDENDS/INTEREST	$50,001 - $100,000	
	Community Bank & Trust Co. - Common Stock	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	
	Commercial Condominium - Wolfeboro, NH	$100,001 - $250,000	RENT	$5,001 - $15,000	
	Community Bank & Trust Co. - Bank Accounts	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Zurcher Kantonal Bank	$250,001 - $500,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$5,001 - $15,000	
SP	Community Bank & Trust Co. - Bank Account	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOSEPH E. BRADLEY, III

	The Mermil, Ltd.	$1,001 - $15,000	ROYALTY	$201 - $1,000
DC	Wilmington Trust Co. - Trust	$1,000,001 - $5,000,000	DIVIDENDS/INTEREST	$5,001 - $15,000
DC	Wilmington Trust Co. - Trust	$1,000,001 - $5,000,000	DIVIDENDS/INTEREST	$5,001 - $15,000
DC	Wilmington Trust Co. - Trust	$1,000,001 - $5,000,000	DIVIDENDS/INTEREST	$5,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name JOSEPH E. BRADLEY, III

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Wilmington Trust - see attached detail			
	Zurcher Kantonal Bank - see attached detail			

JOSEPH E. BRADLEY

Investment Detail (Custom)

Account: 33505-1

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
33505-1	WILMINGTON LARGE CAP GROWTH PORTFOLIO (INSTITUTIONAL CLASS)	2,190.7870	21,732.61
			21,732.61
			21,732.61
33505-1	NEW HAMPSHIRE MUN BD BK 95-A AMBAC P/R 08/15/05 @102 5.25% 08/15/2006	50,000.0000	53,797.50
			53,797.50
			53,797.50
33505-1	WILMINGTON PRIME MM PORT-SERVICE CL	205,702.1700	205,702.17
			205,702.17
			205,702.17
33505-1	U S DOLLARS	80.7000	80.70
			80.70
			80.70
			281,312.98
Total 33505-1			**281,312.98**

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JOSEPH E. BRADLEY

Investment Detail (Custom)

Account: 13193-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
13193-0	CHEVRONTEXACO CORP COMMON	2,015.0000	174,075.85
13193-0	CONOCOPHILLIPS COMMON	1,394.0000	91,404.58
13193-0	EXXON MOBIL CORPORATION COMMON	6,907.0000	283,187.00
13193-0	HALLIBURTON COMPANY COMMON	303.0000	7,878.00
13193-0	IMPERIAL OIL LTD COMMON NEW	600.0000	26,652.00
13193-0	ROYAL DUTCH PETROLEUM CO N Y REGISTRY SHS 1.25 GUILDER PAR	8,000.0000	419,120.00
			1,002,317.43
13193-0	AVON PRODUCTS INCORPORATED COMMON	2,000.0000	134,980.00
			134,980.00
13193-0	BRISTOL-MYERS SQUIBB CO COMMON	8,800.0000	251,680.00
13193-0	JOHNSON & JOHNSON COMMON	243.0000	12,553.38
13193-0	MEDCO HEALTH SOLUTIONS INC COMMON	141.0000	4,792.59
13193-0	MERCK & COMPANY COMMON	1,173.0000	54,192.60
13193-0	PFIZER COMMON	1,313.0000	46,388.29
13193-0	ZIMMER HOLDINGS INC COMMON	880.0000	61,952.00
			431,558.86
13193-0	ENTERASYS NETWORKS INC COMMON	100.0000	375.00
13193-0	MILLIKEN & COMPANY COMMON	898.0000	122,128.00
13193-0	MILLIKEN & COMPANY 5.00% CONV PFD $100 PAR	126.0000	42,840.00
13193-0	TIME WARNER INC COMMON	250.0000	4,497.50
13193-0	WINN-DIXIE STORES COMMON	1,900.0000	18,905.00
			188,745.50
13193-0	EMERSON ELECTRIC COMPANY COMMON	800.0000	51,800.00
13193-0	GENERAL ELECTRIC CO COMMON	9,561.0000	296,199.78
13193-0	TYCO INTERNATIONAL LTD COMMON NEW	2,907.0000	77,035.50
			425,035.28
13193-0	AUTOMATIC DATA PROCESSING COMMON	778.0000	30,816.58
13193-0	CISCO SYSTEMS COMMON	11,616.0000	281,455.68
13193-0	E M C CORP MASSACHUSETTS COMMON	911.0000	11,770.12
13193-0	INTERNATIONAL BUSINESS MACHINES CORP COM	2,432.0000	225,397.76
13193-0	MCDATA CORPORATION COMMON CLASS A	14.0000	133.42
13193-0	MICROSOFT CORP COMMON	400.0000	10,948.00

+ Unknown
^ Incomplete

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Investment Detail (Custom)

Account: 13193-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
13193-0	MOTOROLA COMMON	159.0000	2,226.00
13193-0	NCR CORP COMMON	38.0000	1,474.40
13193-0	NOKIA CORP SPONSORED ADR	500.0000	8,500.00
13193-0	ORACLE CORP COMMON	800.0000	10,584.00
13193-0	RIVERSTONE NETWORKS INC COMMON	51.0000	56.61
13193-0	XEROX CORPORATION COMMON	600.0000	6,280.00
			591,642.57
13193-0	FREEPORT-MCMORAN COPPER & GOLD INC CLASS B	385.0000	16,220.05
13193-0	INTERNATIONAL PAPER COMPANY COMMON	148.0000	6,380.28
			22,600.33
13193-0	AMERICAN INTERNATIONAL GROUP COMMON	509.0000	33,736.52
13193-0	BANK OF AMERICA CORP COMMON	876.0000	70,456.68
13193-0	BERKSHIRE HATHAWAY INC DEL CLASS B	86.0000	242,090.00
			346,283.20
13193-0	CALPINE CORPORATION COMMON	300.0000	1,443.00
13193-0	DOMINION RESOURCES INC VA COMMON	726.0000	46,340.58
13193-0	DUKE ENERGY CORP COMMON	2,000.0000	40,900.00
13193-0	EXELON CORPORATION COMMON	175.0000	11,613.00
13193-0	PIEDMONT NATURAL GAS COMMON	400.0000	17,384.00
			117,680.58
13193-0	DIVERSIFIED EQUITY FUND	615.0000	378,532.50
13193-0	DIVERSIFIED INCOME FUND	663.0000	187,005.78
13193-0	MERIMIL WITHHOLDING TRUST	1,250.0000	0.00
			565,538.28
13193-0	MERIMIL LIMITED PARTNERSHIP INT	1,250.0000	2,462.50
			2,462.50
			3,828,844.53
13193-0	NEW HAMPSHIRE MUN BD BK 95-A AMBAC P/R 08/15/05 @102.5 25% 08/15/2006	50,000.0000	53,797.50

+ Unknown
^ Incomplete

Investment Detail (Custom)

Account: 13193-0
As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
			53,797.50
13193-0	MUNICIPAL BOND FUND	218.0000	18,748 00
			18,748.00
			72,545.50
13193-0	WILMINGTON PRIME MM PORT-SERVICE CL	125,148.7300	125,148 73
			125,148.73
			125,148.73
			4,026,538.76
13193-0	WILMINGTON PRIME MM PORT-SERVICE CL	17,892.7600	17,892 76
			17,892.76
			17,892.76
			17,892.76
Total 13193-0			4,044,431.52

+ Unknown
^ Incomplete

JOSEPH E. BRADLEY

Activity Detail (Custom)

Account: 13193-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
13193-0	Principal	RECEIPTS	Sales	4/1/2003	(50,000.0000)	CALLED DALLAS TEX WTRWKS & SWR SYS RFDG REV P/R 04/01/03 @100 4.9% 04/01/2005	50,000.00
13193-0	Principal	RECEIPTS	Sales	5/8/2003	(450.0000)	EL PASO CORPORATION COMMON SOLD AT 7.50 THROUGH CITATION GROUP/BCC CLEARING/M LYNCH TRADE DATE 05/01/2003	3,347.84
13193-0	Principal	RECEIPTS	Sales	11/14/2003	(177.0000)	ELECTRONIC DATA SYSTEMS CORP NEW COMMON SOLD AT 21.40 THROUGH UBS SECURITIES LLC TRADE DATE 11/10/2003	3,777.00
13193-0	Principal	RECEIPTS	Sales	9/3/2003	(0.9566)	CASH IN LIEU OF FRAC SHR CAPITAL GAIN MEDCO HEALTH SOLUTIONS INC COMMON	24.48
13193-0	Principal	RECEIPTS	Sales	8/2/2003	(25,000.0000)	CALLED NEW HAMPSHIRE HGHR EDL&HFA RFDG REV DARTMOUTH CLDG 5.35% DID P/R 8/1/03@102 5.25% 08/01/2007-03	25,500.00
			Subtotal Sales		**(75,627.9566)**		**83,649.30**
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	121.0000	AMERICAN INTERNATIONAL GROUP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	185.0000	AUTOMATIC DATA PROCESSING COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	208.0000	BANK OF AMERICA CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	9.0000	BERKSHIRE HATHAWAY INC DEL CLASS B FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	88.0000	CHEVRONTEXACO CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	621.0000	CISCO SYSTEMS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00

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Activity Detail (Custom)

Account: 13193-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	109.0000	CONOCOPHILLIPS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	122.0000	E M C CORP MASSACHUSETTS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	42.0000	ELECTRONIC DATA SYSTEMS CORP NEW COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	321.0000	EXXON MOBIL CORPORATION COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	287.0000	GENERAL ELECTRIC CO COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	72.0000	HALLIBURTON COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	59.0000	JOHNSON & JOHNSON COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	14.0000	MEDCO HEALTH SOLUTIONS INC COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	112.0000	MERCK & COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	36.0000	MOTOROLA COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	312.0000	PFIZER COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00
13193-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	215.0000	TYCO INTERNATIONAL LTD COMMON NEW FREE RECEIPT - TAX ACCOUNT TRANSFER TO JOSEPH E BRADLEY III PER 8/17/00 DISTRIBUTION MEMO	0.00

Activity Detail (Custom)

Account: 13193-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
			Subtotal Transfers/Additions		**2,936.0000**		**0.00**
13193-0	Principal	RECEIPTS	Capital Receipts	8/20/2003	127.9566	MEDCO HEALTH SOLUTIONS INC COMMON RECEIVED AS DISTRIBUTION MERCK & CO AT A RATE OF 1208 FOR 1	0.00
13193-0	Principal	RECEIPTS	Capital Receipts	2/18/2003	200.0000	MICROSOFT CORP COMMON RECEIVED AS STOCK SPLIT AT A RATE OF 2 FOR 1	0.00
13193-0	Principal	RECEIPTS	Capital Receipts	10/16/2003	250.0000	TIME WARNER INC COMMON RECEIVED FROM NAME CHANGE	0.00
			Subtotal Capital Receipts		**577.9566**		**0.00**
13193-0	Principal	RECEIPTS	Other Receipts	2/7/2003		MERIMIL LIMITED PARTNERSHIP INT 1,250 UNITS AT .012	5.79
13193-0	Principal	RECEIPTS	Other Receipts	3/7/2003		MERIMIL LIMITED PARTNERSHIP INT 1,250 UNITS AT .005	5.79
13193-0	Principal	RECEIPTS	Other Receipts	4/3/2003		MERIMIL LIMITED PARTNERSHIP INT 1,250 UNITS AT .003	5.79
13193-0	Principal	RECEIPTS	Other Receipts	11/5/2003		MERIMIL LIMITED PARTNERSHIP INT 1,250 UNITS AT .081	37.85
13193-0	Principal	RECEIPTS	Other Receipts	12/2/2003		MERIMIL LIMITED PARTNERSHIP INT 1,250 UNITS AT .004	5.41
			Subtotal Other Receipts		**0.0000**		**60.63**
		Subtotal RECEIPTS			**(72,115.0000)**		**82,709.93**
13193-0	Principal	DISBURSEMENTS	Capital Disbursements	10/16/2003	(250.0000)	AOL TIME WARNER INC COMMON DELIVERED FOR NAME CHANGE	0.00
			Subtotal Capital Disbursements		**(250.0000)**		**0.00**
		Subtotal DISBURSEMENTS			**(250.0000)**		**0.00**
	Subtotal Principal				**(72,365.0000)**		**82,709.93**
Total 13193-0					**(72,365.0000)**		**82,709.93**

Zürcher Kantonalbank

Client :	Bradley Barbara –Rutz
Client no.:	0137619
Portfolio :	consolidated
Portfolio no.:	
Investment strategy :	
Advisor :	Ehrensperger Thomas

Asset list as of 31.12.2003

No./Nominal Currency	Description Sec. no.	Int. period	Callable	Rating	Maturity Yield	Market price Purch. price	Exch. rate Exch. cost	Market value USD Accr.interest	Capital Profit USD Capital Profit %	% of Assets Currency Profit USD
Cash										
Cash Accounts										
Cash Accounts CHF										
76 CHF	Private account, Heading: PORTFOLIOMANAGEMENT/D143369 1100–0034.624						0.8085	61.69	0.00 %	0.02 %
84 CHF	Private account, Heading: SEPARAT 1100–0077.536						0.8085	68.24	0.00 %	0.02 %
Cash Accounts Foreign Currency North America										
1'261 USD	Current account, Heading: PORT.MANAG./D143369 1300–0408.220						1.0000	1'260.81	0.00 %	0.31 %
Total Cash								**1'390.74**	**0.00 %**	**0.34 %** **0.00**

BV1821/06.03/1 000071 20040326000001303629104000000 ZAD.OBV.PRBIO.DEZ.00071V00

Zürcher Kantonalbank

Client :	Bradley Barbara -Rutz
Client no.:	0137619
Portfolio :	consolidated
Portfolio no.:	
Investment strategy :	
Advisor :	Ehrensperger Thomas

Asset list as of 31.12.2003

No./Nominal Currency	Description Sec. no.	Int. period	Callable	Rating	Maturity Yield	Market price Purch. price	Exch. rate Exch. cost	Market value USD Accr.interest	Capital Profit USD Capital Profit %	% of Assets Currency Profit USD
Fixed Income										
Fixed Income CHF Foreign										
20'000 CHF	3 1/4 % OESTERREICH 1998-2006 00083751500000	yearly		AAA : ST&P	27.01.2006 1.14 %	104.30 101.50	0.8085 0.7289	16'866.11 486.13	452.78 3.06 %	4.27 % 1'642.01
20'000 CHF	2 1/2 % NEDERLANDSE WATERSCHAPSBK -2007 EMTN 00042288700000	yearly		AAA : ST&P	30.03.2007 1.50 %	103.15 102.60	0.8085 0.7289	16'680.14 303.20	88.94 0.59 %	4.18 % 1'646.8[illegible]
30'000 CHF	3 3/4 % DEUTSCHE BANK 1997-2007 00065667400000	yearly		AA- : ST&P	17.07.2007 1.89 %	106.30 101.35	0.8085 0.7289	25'784.28 411.85	1'200.68 5.42 %	6.45 % 2'422.7[illegible]
20'000 CHF	1 3/4 % DEPFA 2003-2008 PFANDBR.EMTN 00154258300000	yearly		AAA : ST&P	18.02.2008 1.76 %	99.95 100.60	0.8085 0.7289	16'162.68 245.25	-105.11 -0.72 %	4.04 % 1'614.6[illegible]
20'000 CHF	3 1/4 % RESEAU FERRE DE FRANCE 1998-2008 00085274700000	yearly		AAA : ST&P	12.09.2008 2.02 %	105.45 98.50	0.8085 0.7289	17'052.07 157.66	1'123.87 7.83 %	4.24 % 1'613.6[illegible]
30'000 CHF	3 1/8 % BAYERISCHE LANDESBANK 1999-2009 00098803600000	yearly		AAA : ST&P	10.02.2009 2.18 %	104.50 97.40	0.8085 0.7289	25'347.67 673.78	1'722.19 8.09 %	6.40 % 2'360.9[illegible]
30'000 CHF	2 % COMPAGNIE DE FINANCEMENT FONCIER -2009 00160352600000	yearly		AAA : ST&P	11.06.2009 2.16 %	99.20 98.25	0.8085 0.7263	24'062.10 268.17	230.43 1.08 %	5.99 % 2'438.0[illegible]
30'000 CHF	3 1/8 % ITALIEN 1999-2010 00098187000000	yearly		AA : ST&P	15.07.2010 2.43 %	104.15 96.40	0.8085 0.7289	25'262.77 347.42	1'879.85 8.92 %	6.30 % 2'304.8[illegible]
30'000 CHF	3 % DEVELOPMENT BANK OF JAPAN 1998-2005 00085097300000	yearly		AA- : ST&P	10.03.2005 0.93 %	102.43 97.45	0.8085 0.7289	24'845.57 586.19	1'207.96 5.67 %	6.26 % 2'354.8[illegible]
Total Fixed Income CHF Foreign								19'[illegible]	[illegible]	[illegible]

Zürcher Kantonalbank

Client :	Bradley Barbara -Rutz
Client no.:	0137619
Portfolio :	consolidated
Portfolio no.:	
Investment strategy :	
Advisor :	Ehrensperger Thomas

Asset list as of 31.12.2003

No./Nominal Currency	Description Sec. no.	Int. period	Callable	Rating	Maturity Yield	Market price Purch. price	Exch. rate Exch. cost	Market value USD Accr.Interest	Capital Profit USD Capital Profit %	% of Assets Currency Profit USD
Fixed Income Foreign Currency										
Fixed Income Foreign Currency Europe										
330 EUR	UTS -B- SWISSCA BONDS INVEST FCP -EUR- CAP. 00154430100000					65.02 63.23	1.2614 1.0643	27'064.32 0.00	745.08 3.36 %	6.66 % 4'111.60
Total Fixed Income Foreign Currency Europe								27'064.32 0.00	745.08 3.36 %	6.66 % 4'111.60
Fixed Income Foreign Currency North America										
20'000 USD	5 % BNG 2002-2007 EMTN 00135689300000	yearly		AAA : ST&P	22.03.2007 2.83 %	106.59 105.14	1.0000 1.0000	21'318.00 772.22	290.00 1.38 %	5.44 % 0.00
30'000 USD	2 1/4 % GROSSBRITANNIEN & NORDIRLAND -08 NTS 00163149500000	yearly		AAA : ST&P	08.07.2008 3.17 %	96.16 96.34	1.0000 1.0000	28'848.00 322.50	-54.00 -0.19 %	7.18 % 0.00
20'000 USD	5 1/4 % WELTBANK 1999-2009 EMTN 00098852300000	yearly		AAA : ST&P	12.01.2009 3.49 %	108.00 106.85	1.0000 1.0000	21'600.00 1'015.00	230.00 1.08 %	5.57 % 0.00
25'000 USD	3 7/8 % SCHWEDEN 2002-2009 EMTN 00150489000000	yearly		AAA : ST&P	29.12.2009 3.67 %	101.09 102.47	1.0000 1.0000	25'272.50 2.69	-345.00 -1.35 %	6.22 % 0.00
Total Fixed Income Foreign Currency North America								97'038.50 1'112.41	131.00 0.13 %	24.40 % 0.00
Total Fixed Income Foreign Currency								124'102.82 1'112.41	876.08 0.72 %	31.07 4'111.60
Total Fixed Income								**316'166.21** 5'502.04	**8'667.67** 3.04 %	**79.20 %** [illegible]

Zürcher Kantonalbank

Client :	Bradley Barbara –Rutz
Client no.:	0137619
Portfolio :	consolidated
Portfolio no.:	
Investment strategy :	
Advisor :	Ehrensperger Thomas

Asset list as of 31.12.2003

No./Nominal Currency	Description Sec. no.	Int. period	Callable	Rating	Maturity Yield	Market price Purch. price	Exch. rate Exch. cost	Market value USD Accr.interest	Capital Profit USD Capital Profit %	% of Asset Currency Profit USD
Equities										
Equities Switzerland										
40 CHF	ANT.ZKB FONDS AKTIEN SCHWEIZ 00117924500000					756.00 682.00	0.8085 0.7289	24'450.19 0.00	2'393.27 12.04 %	6.02 % 2'173.54
Total Equities Switzerland								[illegible]	[illegible]	
Equities Foreign										
Equities Foreign Europe										
3'100 EUR	REG.SHS –A– FIDELITY FDS–EUROPEAN GROWTH FD– 0006075120010 0					7.04 6.41	1.2614 1.0905	27'512.10 0.00	2'447.78 11.30 %	6.77 % 3'395.96
Total Equities Foreign Europe								27'512.10 0.00	2'447.78 11.30 %	6.77 3'395.96

DV1021/06.03/1 000074 [illegible] ZAD.OSV.PRBID.DE2.G0071V00

Zürcher Kantonalbank

Client :	Bradley Barbara -Rutz
Client no.:	0137619
Portfolio :	consolidated
Portfolio no.:	
Investment strategy :	
Advisor :	Ehrensperger Thomas

Asset list as of 31.12.2003

No./Nominal Currency	Description Sec. no.	Int. period	Callable	Rating	Maturity Yield	Market price Purch. price	Exch. rate Exch. cost	Market value USD Accr.interest	Capital Profit USD Capital Profit %	% of Assets Currency Profit USD
Equities Foreign North America										
65 USD	REG.SHS -B- NORDEA 1,-NORTH AMER.VALUE- CAP. 00060130000000					344.10 255.07	1.0000 1.0000	22'366.50 0.00	5'786.95 34.90 %	5.51 % 0.00
Total Equities Foreign North America								22'366.50 0.00	5'786.95 34.90 %	[illegible] [illegible]
Equities Foreign Pacific										
200 USD	REG.SHS -JF-A- JPM FLEMING -PACIFIC EQU.FD- 00059565100000					44.00 39.40	1.0000 1.0000	8'800.00 0.00	920.00 11.68 %	2.17 % 0.00
Total Equities Foreign Pacific								8'800.00 0.00	920.00 11.68 %	2.17 % 0.00
Total Equities Foreign								55'578.00 0.00	9'154.75 19.85 %	[illegible] 3'393.50
Total Equities								**83'128.79** **0.00**	**11'548.00** **17.49 %**	**20.46 %** **5'569.50**
Total								**400'685.74** 5'592.06	**20'215.67** **5.76 %**	**100.00 %** **28'079.64**

Zürcher Kantonalbank

PRIVATE BANKING

Customer-ID:	0.137.619
Owner:	Bradley-Rutz Barbara

[redacted]

AS OF 31.12.2003

Not suitable for tax purposes

Date	Type of Business	Description	Currency	Interest / Income	Withholding tax	exchange rate	Net Income USD
	Accounts						
June 30, 2003	1100-0034.624	Private account (Portfoliomanag.)	CHF	1.50	0.55	1.3520	0.70
Dec. 31, 2003			CHF	-5.70	0.00	1.2367	-4.61
June 30, 2003	1300-00408.220	Current account	USD	0.00	0.00	-	0.00
	Custody accounts						
Dec. 31, 2003	000-143369	Securities account	USD	11'633.64	149.65	-	11'483.99
		TOTAL					11'487.88

Please examine this statement and accompanying enclosures carefully. Unless the contents are contested within one month of the date of issue, it will be deemed as being approved and correct.
The bank is not liable for any damages resulting from incomplete or incorrect information as long as it is not gross negligence on its part.
The details of this statement are based on the enclosed copies.

S.E.&.O.

Sincerely Yours

Zürcher Kantonalbank

Ehrenberger

Thomas Ehrenberger

Susanne Gebauer

Zurich, March 30, 2004

Zürcher Kantonalbank
IVATE BANKING

Depot number:	000-143369
Depot owner:	Bradley-Rutz Barbara
category:	Bradley-Rutz Barbara

GAINS AND LOSSES — PERIOD 01.01.-31.12.2003

Not suitable for tax purposes

date	purchase / sale	Number/per value currency	Description	price original currency	price USD	ex. rate	Commission, contributions USD	taxes, stamp duty	Charges	net in USD	capital gain / capital loss
21.2000	p	30'000	[illegible]								
. 23, 2003	s	-10'000	sale	CHF 10'252.00	8'157.87	1.2567	0.00	0.00	0.84	8'157.03	
21.2000	p	10'000 (40'000)	[illegible]								
. 23, 2003	s	-10'000	sale	CHF 10'252.00	8'157.87	1.2567	0.00	0.00	0.84	8'157.03	1'915.95
e 24, 1994	p	30'000	4 1/4 % Finnland 1993-2003	CHF 27'600.00	20'581.66	1.3410	0.00	34.90	0.00	20'616.56	
26.1993	p	30'000	[illegible]								
e 26, 2003	s	-20'000	sale	CHF 20'356.00	15'259.37	1.3340	0.00	0.00	1.57	15'257.80	
26.1993	p	20'000 (50'000)	[illegible]								
e 26, 2003	s	-20'000	sale	CHF 20'356.00	15'259.37	1.3340	0.00	0.00	1.57	15'257.80	1'513.43
. 29, 1994	p	30'000	6 1/2 % Canada 1994-2004	CAD 25'596.00	18'238.84	0.9470 / 1.3290	0.00	0.00	17.81	18'256.65	
16.2003	p	15'000	[illegible]								
. 29, 2003	s	-15'000	sale	CAD 15'813.50	10'173.92	0.8800 / 1.3505	0.00	0.00	0.00	10'173.92	
29.1994	p	15'000 (30'000)	[illegible]								
. 29, 2003	s	-15'000	sale	CAD 15'813.50	10'173.92	0.8800 / 1.3505	0.00	0.00	0.00	10'173.92	1'045.59
. 8, 1998	p	30'000	6 % Province of Ontano 1996-2006	USD 30'117.00	30'117.00	-	0.00	46.24	16.76	30'180.00	
20.1998	p	20'000	[illegible]								
. 23, 2003	s	-20'000	sale	USD 21'556.00	21'556.00	-	0.00	0.00	3.50	21'552.50	
8.1998	p	20'000 (50'000)	[illegible]								
. 23, 2003	s	-20'000	sale	USD 21'556.00	21'556.00	-	0.00	0.00	3.50	21'552.50	1'432.50
. 21, 1998	p	15'000	5 5/8 % EIB 1998-2005 EMTN	USD 15'022.50	15'022.50	-	0.00	0.00	16.50	15'039.00	
17, 2003	p	15'000	[illegible]								
17.2001	p	-80	Ant. Sw. [illegible]						0.00	[illegible]	
. 30, 2003	s	-80	sale	USD 11'624.00	11'624.00	-	0.00	8.72	0.00	11'615.28	-5'085.24
17, 2001	p	130	Ant. Swissca Continental Eq. Fd. Asia, O N.	CHF 11'843.00	6'753.92	1.7535	0.00	5.08	0.00	6'759.00	
28.2003	p	[illegible]	[illegible]						0.00	6'809.50	-50.50

Zurcher Kantonalbank
'RIVATE BANKING

Depot number:	000-143369
Depot owner:	Bradley-Rutz Barbara
category:	Bradley-Rutz Barbara

[redacted] PERIOD 01.01.-31.12.2003

Not suitable for tax purposes

date	purchase / sale	Number/per value currency	Description	price original currency	price USD	ex. rate	Commission, contributions USD	taxes, stamp duty	Charges	net in USD	capital gain / capital loss
ec. 23, 1999	e	5	N-Akt. Schweiz. Rückvers.-Gesellschaft, CHF 10	CHF 15'820.00	10'025.35	1.5780	0.00	0.00	0.00	10'025.35	
[redacted]											
ug. 17, 2001	e	-5	split 1 :20								
[redacted]											
ug 17, 2001	e	100	N-Akt. Schweiz Rückvers.-Gesellschaft, CHF -10								
[redacted]											
[redacted]											
ec 23, 1999	e	100 (5)	N-Akt. Schweiz Rückvers -Gesellschaft, CHF 10	CHF 15'820 00	10'025.35	1 5780	0 00	0 00	0.00	10'025.35	
[redacted]											
[redacted]											
pril 17, 1997	s	-5	sale								
[redacted]											
ug 20, 1998	s	-5	sale								
[redacted]											
ne 11, 2001	e	-5	split 1 : 10								
[redacted]											
ne 11, 2001	e	50	N-Akt Nestlé SA, CHF 1								
[redacted]											
[redacted]											
ct. 15, 1996	p	5 (25)	pruchase	CHF 7'050 00	5'565 20	1.2668	0 00	0 00	5 03	5'560.17	
[redacted]											

Kantonalbank
IVATE BANKING

Depot number:	000-143369
Depot owner:	Bradley-Rutz Barbara
category:	Bradley-Rutz Barbara

PITAL GAINS AND LOSSES PERIOD 01.01.-31.12.2003

Not suitable for tax purposes

date	purchase / sale	Number/per value currency	Description	price original currency	price USD	ex. rate	Commission, contributions USD	taxes, stamp duty	Charges	net in USD	capital gain / capital loss
5, 1998	p	100	N-Akt. SBV, CHF 40	CHF 48'887.00	32'472.47	1.4439	0.00	126.34	1.26	32'500.07	
e 29, 1998	e	-100	merger: exchange ratio 1 : 1 1/13								
e 29, 1998	e	107	N-Akt. UBS AG, CHF 20 new security no. 847052								
20, 1998	s	-40	sale								
il 14, 2000	s	-27	sale								
6, 2000	e	-40	split 1 : 2								
8, 2000	e	80	N-Akt.UBS AG, CHF 10 new security no. 1074074								
y 16, 2001			capital reduction from CHF 10 to CHF 8.40	CHF 128.00	73.29	1.7465	0.00	0.00	0.00	73.29	
16, 2001	e	-80	split 1 : 3								
16, 2001	e	240	N-Akt. UBS, CHF 2.80 new security no. 1203203								
y 17, 2003	s	-240	sale	CHF 18'744.00	13'663.80	1.3718	0.00	10.24	1.49	13'652.07	
5, 1998	p	37 1428 (100)	purchase	CHF 17'415.14	12'061.18	1.4439	0.00	9.04	1.27	12'071.43	
y 17, 2003	s	-240	sale	CHF 18'744.00	13'663.80	1.3718	0.00	10.24	1.49	13'652.07	1'580.64

Kantonalbank
PRIVATE BANKING

Depot number	000-143369
Depot owner:	Bradley-Rutz Barbara
category:	Bradley-Rutz Barbara

[redacted] PERIOD 01.01.-31.12.2003

Not suitable for tax purposes

date	purchase / sale	Number/per value currency	Description	price original currency	price USD	ex. rate	Commission, contributions USD	taxes, stamp duty	Charges	net in USD	capital gain / capital loss
eb. 3, 2003	p	80	Reg. shs -B- Nordea 1, -North Amer Value- Cap.	USD 20'405.60	20'405.60	-	24 79	30.61	0.00	20'461.00	
[redacted]											
eb. 3, 2003	p	15 (80)	purchase	USD 3'826 05	3'826 05	-	4 65	5 74	0 00	3'836 44	
[redacted]											
[redacted]											
[redacted]		TOTAL									4'122.17

ease examine this statement and accompanying enclosures carefully. Unless the contents are contested within one month of the date of issue, it will be deemed as being approved and correct.
e bank is not liable for any damages resulting from incomplete or incorrect information as long as it is not gross negligence on its part.
e details are based on the enclosed copies.

S.E.&.O.

ncerely yours

ircher Kantonalbank

Ehrensperger

omas Ehrensperger Susanne Gebauer

Zurich, March 30, 2004

Kantonalbank

PRIVATE BANKING

Securities a/c	000-143369
Depositor:	Bradley-Rutz Barbara
Heading:	Bradley-Rutz Barbara

OVERVIEW NET INCOME

PERIOD 31.12.2003

Not suitable for tax purposes

Number / par value currency	Security no	Description	Gross proceeds original currency	Tax	Net proceeds original currency	rate USD	Gross proceeds USD	Net proceeds USD
CHF 20'000	422'887	2 1/2 % Nederlandse Waterschapsbk -2007 EMTN						
		Due date of coupon 10 01 2003	CHF 500 00	0 00	CHF 500 00	1 3718	368 09	368 09
CHF 30'000	865'174	3 1/4 % Deutsche Bank 1997-2007						
		Due date of coupon 17 07 2003	CHF 1'125 00	0 00	CHF 1.125 00	1 3718	820 09	820 09
CHF 20'000	852'747	3 1/4 % Reseau Ferre de France 1998-2008						
		Due date of coupon 13 02 2003	CHF 650 00	0 00	CHF 650 00	1 3400	476 47	476 47
CHF 30'000	998'035	3 7/8 % Bayerische Landesbank 1998-2008						
		Due date of coupon 10.02.2003	CHF 937 50	0 00	CHF 937 50	1 3400	699 63	699 63
CHF 30'000	981'870	3 1/8 % Italien 1999-2010						
		Due date of coupon 15 07 2003	CHF 937 50	0 00	CHF 937 50	1 3718	683 09	683 09
CHF 30'000	850'973	3 % Development Bank of Japan 1998-2008						
		Due date of coupon 10 03 2003	CHF 1'200 00	0 00	CHF 1'200 00	1 3150	912 55	912 55
USD 30'000	1'356'893	5 % BNG 2002-2007 EMTN						
		Due date of coupon 22 01 2003	USD 1'166 66	0 00	USD 1'166 66	-	1'166 66	1'166 66
USD 20'000	948'523	5 1/4 % Wellbank 1998-2009 EMTN						
		Due date of coupon 12 01 2003	USD 1'050 00	0 00	USD 1'050 00	-	1'050 00	1'050 00
USD 25'000	1'504'890	3 7/8 % Schweden 2002-2009 EMTN						
		Due date of coupon 20 01 2003	USD 968 75	0 00	USD 968 75	-	968 75	968 75
0	428'735	6 % Finnland 1998-2006						
		Due date of coupon 21 02 2003	USD 600 00	0 00	USD 600 00	-	600 00	600 00
		Due date of coupon 21 02 2003	USD 600 00	0 00	USD 600 00	-	600 00	600 00
0	887'515	3 1/4 % Deutsche Bank 1998-2006						
		Due date of coupon 27 01 2003	CHF 650 00	0 00	CHF 650 00	1 3375	485 98	485 98
0	842'918	5 5/8 % EIB 1998-2005 EMTN						
		Due date of coupon 27 02 2003	USD 843 75	0 00	USD 843 75	-	843 75	843 75

Zürcher Kantonalbank

PRIVATE BANKING

Securities a/c:	000-143369
Depositor:	Bradley-Rutz Barbara
Heading:	Bradley-Rutz Barbara

OVERVIEW NET INCOME

PERIOD 31.12.2003

Not suitable for tax purposes

Number / par value currency	Security no	Description	Gross proceeds original currency	Tax	Net proceeds original currency	rate USD	Gross proceeds USD	Net proceeds USD
Pcs. -330-	1'130'344	UBS - A - Swiss Bond Index - EUR - EUR						
		Due date of coupon 28.02.2003	EUR 940.50	0.00	EUR 940.50	1.4536 / 1.3435	1'017.57	1'017.57
Pcs. -40-	1'179'245	Ant. ZKB Fond Aktien Schweiz						
		Due date of coupon 08.12.2003	CHF 120.00		CHF 120.00			
Pcs. -100-	661'572	Ant. UBS Fund Mgt. - Europlan Growth Equity						
		Due date of coupon 15.08.2003	EUR 146.01	0.00	EUR 146.01	1.5378 / 1.3718	163.69	163.69
0	1'203'203	N-Akt. UBS, CHF - 80						
		Due date of coupon 23.04.2003	CHF 200.00		CHF 200.00			
0	1'205'604	N-Akt. Nestlé SA, CHF - 1						
		Due date of coupon 09.04.2003	CHF 350.00	122.50	CHF 227.50	1.3630	258.79	166.91
0	1'233'237	N-Akt. Schweiz. Rückvers.-Gesellschaft, CHF - 10						
		Due date of coupon 30.05.2003	CHF 100.00		CHF 100.00			
		TOTAL					11'633.84	11'483.99

Management fees 2003 period 01.01.2003-30.06.2003 CHF 3'075.15 = Total USD	2'274.52	1.3520		
Management fees 2003 period 01.07.2003-31.12.2003 CHF 3'245.35 = Total USD	2'624.20	1.2367	Total Custody account fees USD 4'898.72	

Please examine this statement and accompanying enclosures carefully. Unless the contents are contested within one month of the date of issue, it will be deemed as being approved and correct. The Bank is not liable for any damages resulting from incomplete or incorrect information as long as it is not gross negligence on its part.
The details of this statement are based on the enclosed earnings settlements.

S.E.&O.

Sincerely yours

Zürcher Kantonalbank

Thomas Ehrensperger

Susanne Gebauer

Zurich, March 30, 2004

JEB 5692295 05/10/04 11:17am P. 002

HYPOTHEKARBANK LENZBURG

Bahnhofstrasse 2, Postfach, 5600 Lenzburg 1
Telefon 062 885 11 11, Telefax 062 885 15 95
Banken-Clearing-Nr.: 8307, Postkonto: 50-89-8
MwSt-Nr.: 255 376, Internet: www.hbl.ch
E-Mail: info@hbl.ch

Einladung zum 45. "Jazz in der Hypi"

Das Andrees Baer Trio plus One spielt am
Freitag, 5. März 2004 von 18.45 - 20.45 Uhr
in der Schalterhalle des Hauptsitzes in Lenzburg.

Der Eintritt ist frei.

Frau 09280611
Barbara Bradley-Rutz
South Main Street
Box 1420
US Wolfeboro, N.H. 03894

Konto: 92 806 015

Neuer Saldo per 01.03.2004 zu Ihren Gunsten SFR 22 479.75

Buchungen vom 01.03.2004 aus Depot-, Kassenobligationen- und Schalter-Transaktionen sind in diesem Betrag noch nicht enthalten.

HYPOTHEKARBANK LENZBURG

BELASTUNGSANZEIGE

Bahnhofstrasse 2, Postfach, 5600 Lenzburg 1
Telefon 062 885 11 11, Telefax 062 885 15 95
Banken-Clearing-Nr. 8307, Postkonto 50-89-8
MwSt-Nr.: 255 376, Internet: www.hbl.ch
E-Mail: info@hbl.ch

SPARKONTO 92 806 015

Frau
Barbara Bradley-Rutz
South Main Street
Box 1420
US Wolfeboro, N.H. 03894

LENZBURG, 05.02.2004 REF: 01006643.0002/EA

WIR HABEN IHREM KONTO
BELASTET: SFR 20.00 WERT 02.02.2004

BEGUENSTIGTER

HYPOTHEKARBANK LENZBURG
5600 LENZBURG

ZAHLUNGSGRUND STEUERAUSZUG 31.12.03
STEUERAUSZUG 31.12.03

<<005086>>

Mit freundlichen Grüssen
HYPOTHEKARBANK LENZBURG
Anzeige ohne Unterschrift

HYPOTHEKARBANK LENZBURG

STEUERAUSZUG PER 31.12.2003

LENZBURG, 21.01.2004

DEPOT 92 806 708

TEL. 062 885 11 11

Frau
Barbara Bradley-Rutz
US Wolfeboro, N.H. 03894

R E K A P I T U L A T I O N	VERMÖGEN PER 31.12.2003	ERTRÄGE 2003
-A- WERTE MIT VST-ABZUG	21 949.75	127.25
-B- WERTE OHNE VST-ABZUG	12 465.00	550.00
TITEL MIT PAUSCHALER STEUERANRECHNUNG	0.00	0.00
TITEL MIT STEUERRÜCKBEHALT USA	0.00	0.00
		677.25
TOTAL WERTSCHRIFTEN	34 414.75	
EDELMETALLE/DOKUMENTE/DIVERSES	0.00	
TOTAL STEUERBARES VERMÖGEN OHNE RÜCKKAUFSWERTE VON LEBENSVERSICHERUNGEN	34 414.75	
TOTAL STEUERBARE ERTRÄGE		677.25

ERTRÄGE AUS DEM JAHR 2003

035710>>

HYPOTHEKARBANK LENZBURG

STEUERAUSZUG PER 31.12.2003
A-WERTE MIT VST-ABZUG

LENZBURG, 21.01.2004

DEPOT 92 806 708

TEL. 062 885 11 11

Frau
Barbara Bradley-Rutz
US Wolfeboro, N.H. 03894

SEITE 1

Währung	Nominalbetrag oder Anzahl	Zinssatz	Titelbezeichnung	Valoren-nummer	Verfall	Steuerkurs bzw. Handelskurs	Steuerwert	Brutto	
SFR	21 949.75	SPARH/K	HYPOTHEKARBANK LENZBURG 92 806 015 31.12.03 ZINS	15		100.00%	21 949.75	127.25	
			TOTAL STEUERWERT UND BRUTTOERTRAG				21 949.75	127.25	
			* ZU ÜBERTRAGEN INS WERTSCHRIFTEN-VERZEICHNIS UNTER RUBRIK -A-				*	*	
035708									ERTRÄGE AUS DEM JAHR 2003

HYPOTHEKARBANK LENZBURG

STEUERAUSZUG PER 31.12.2003
B-WERTE OHNE VST-ABZUG

LENZBURG, 21.01.2004

DEPOT 92 806 708

TEL. 062 885 11 11

Frau
Barbara Bradley-Rutz
US Wolfeboro, N.H. 03894

Währung	Nominalbetrag oder Anzahl	Zinssatz	Titelbezeichnung	Valoren-Nummer	Verfall	Steuerkurs bzw. Handelskurs	Steuerwert	Ertrag	
SFR	10 000	5 1/2 %	INTERN.BANK F.RECON.+DEVELOP.1986-16 05.02.03 ZINS	880478	05.02.2016	124.65%	12 465.00	550.00	
			TOTAL STEUERWERT UND BRUTTOERTRAG				12 465.00 *	550.00 *	
			* ZU ÜBERTRAGEN INS WERTSCHRIFTEN-VERZEICHNIS UNTER RUBRIK -B-						
035709								ERTRÄGE AUS DEM	JAHR 2003

Activity Detail (Custom)

Account: 27308-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27308-0	Principal	RECEIPTS	Sales	11/17/2003	(42.0000)	ELECTRONIC DATA SYSTEMS CORP NEW COMMON SOLD AT 21.88 THROUGH CITATION GROUP/BCC CLEARING/M LYNCH TRADE DATE: 11/12/2003	916.39
27308-0	Principal	RECEIPTS	Sales	9/3/2003	(0.1304)	CASH IN LIEU OF FRAC SHR CAPITAL GAIN MEDCO HEALTH SOLUTIONS INC COMMON	3.33
			Subtotal Sales		(42.1304)		919.72
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	AMERICAN INTERNATIONAL GROUP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	43.0000	AUTOMATIC DATA PROCESSING COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	49.0000	BANK OF AMERICA CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	2.0000	BERKSHIRE HATHAWAY INC DEL CLASS B FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	20.0000	CHEVRONTEXACO CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	145.0000	CISCO SYSTEMS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	25.0000	CONOCOPHILLIPS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	E M C CORP MASSACHUSETTS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00

Activity Detail (Custom)

Account: 27308-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	10.0000	ELECTRONIC DATA SYSTEMS CORP NEW COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	74.0000	EXXON MOBIL CORPORATION COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	87.0000	GENERAL ELECTRIC CO COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	17.0000	HALLIBURTON COMPANY COMMON FREE RECEIPT TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	13.0000	JOHNSON & JOHNSON COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	11/3/2003	3.0000	MEDCO HEALTH SOLUTIONS INC COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	26.0000	MERCK & COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	9.0000	MOTOROLA COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	73.0000	PFIZER COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27308-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	50.0000	TYCO INTERNATIONAL LTD COMMON NEW FREE RECEIPT - TAX ACCOUNT TRANSFER TO NOEL ADAM BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
			Subtotal Transfers/Additions		682.0000		0.00

Activity Detail (Custom)

Account: 27308-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27308-0	Principal	RECEIPTS	Capital Receipts	8/20/2003	10.1304	MEDCO HEALTH SOLUTIONS INC COMMON RECEIVED AS DISTRIBUTION MERCK & CO. AT A RATE OF .1208 FOR 1	0.00
			Subtotal Capital Receipts		10.1304		0.00
		Subtotal RECEIPTS			850.0000		919.72
	Subtotal Principal				850.0000		919.72
Total 27308-0					850.0000		919.72

NOEL BRINKLEY

Investment Detail (Custom)

Account: 22159-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
22159-0	CHEVRONTEXACO CORP COMMON	100.0000	8,639.00
			8,639.00
22159-0	AVON PRODUCTS INCORPORATED COMMON	400.0000	26,996.00
			26,996.00
22159-0	WYETH COMMON	120.0000	5,094.00
			5,094.00
22159-0	DOW JONES & COMPANY COMMON	300.0000	14,955.00
			14,955.00
22159-0	INTERNATIONAL BUSINESS MACHINES CORP COM	400.0000	37,072.00
			37,072.00
22159-0	ALCAN INC COMMON	150.0000	7,042.50
22159-0	LUBRIZOL CORPORATION COMMON	1,000.0000	32,520.00
			39,562.50
22159-0	DOMINION RESOURCES INC VA COMMON	604.0000	38,553.32
			38,553.32
22159-0	DIVERSIFIED EQUITY FUND	109.5407	67,422.30
			67,422.30
			238,294.12
22159-0	WILMINGTON PRIME MM PORT-SERVICE CL	69,299.2600	69,299.26
			69,299.26
			69,299.26
			307,593.38
Total 22159-0			**307,593.38**

NOEL BRADLEY

Investment Detail (Custom)

Account: 26166-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
26166-0	CHEVRONTEXACO CORP COMMON	349.0000	30,150.11
			30,150.11
26166-0	CVS CORPORATION COMMON	400.0000	14,448.00
			14,448.00
26166-0	EMERSON ELECTRIC COMPANY COMMON	400.0000	25,900.00
			25,900.00
26166-0	INTERNATIONAL BUSINESS MACHINES CORP COM	432.0000	40,037.76
			40,037.76
26166-0	FREEPORT-MCMORAN COPPER & GOLD INC CLASS B	385.0000	16,220.05
			16,220.05
26166-0	FPL GROUP COMMON	325.0000	21,261.50
26166-0	PIEDMONT NATURAL GAS COMMON	400.0000	17,384.00
			38,645.50
26166-0	CREDIT SUISSE INTERNATIONAL FOCUS FUND INC COMMON SHS	1,557.8900	16,498.06
			16,498.06
26166-0	DIVERSIFIED EQUITY FUND	233.3678	143,637.88
			143,637.88
			328,537.36
26166-0	FIXED INCOME FUND	232.7514	9,095.92
			9,095.92
			9,095.92
26166-0	WILMINGTON PRIME MM PORT-SERVICE CL	211,675.5200	211,675.52
			211,675.52
			211,675.52

Run Date 4/28/2004 12:44:36 PM

Investment Detail (Custom)

Account: 26166-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
			546,308.80
Total 26166-0			546,308.80

· NOEL BRADLEY

Investment Detail (Custom)

Account: 27308-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
27308-0	CHEVRONTEXACO CORP COMMON	86.0000	7,429.54
27308-0	CONOCOPHILLIPS COMMON	106.0000	6,950.42
27308-0	EXXON MOBIL CORPORATION COMMON	314.0000	12,874.00
27308-0	HALLIBURTON COMPANY COMMON	72.0000	1,872.00
			29,125.96
27308-0	JOHNSON & JOHNSON COMMON	57.0000	2,944.62
27308-0	MEDCO HEALTH SOLUTIONS INC COMMON	13.0000	441.87
27308-0	MERCK & COMPANY COMMON	110.0000	5,082.00
27308-0	PFIZER COMMON	307.0000	10,846.31
			19,314.80
27308-0	GENERAL ELECTRIC CO COMMON	282.0000	8,736.36
27308-0	TYCO INTERNATIONAL LTD COMMON NEW	212.0000	5,618.00
			14,354.36
27308-0	AUTOMATIC DATA PROCESSING COMMON	181.0000	7,169.41
27308-0	CISCO SYSTEMS COMMON	610.0000	14,780.30
27308-0	E M C CORP MASSACHUSETTS COMMON	118.0000	1,524.56
27308-0	MOTOROLA COMMON	37.0000	518.00
			23,992.27
27308-0	AMERICAN INTERNATIONAL GROUP COMMON	118.0000	7,821.04
27308-0	BANK OF AMERICA CORP COMMON	205.0000	16,488.15
27308-0	BERKSHIRE HATHAWAY INC DEL CLASS B	9.0000	25,335.00
			49,644.19
27308-0	DIVERSIFIED EQUITY FUND	131.0087	80,635.85
			80,635.85
			217,067.43
27308-0	FIXED INCOME FUND	484.2491	18,924.45
			18,924.45
			18,924.45
27308-0	WILMINGTON PRIME MM PORT-SERVICE CL	167,883.5600	167,883.56

Investment Detail (Custom)

Account: 27308-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
			167,883.56
			167,883.56
			403,875.44
Total 27308-0			403,875.44

SEBASTIAN BRADLEY

Investment Detail (Custom)

Account: 22747-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
22747-0	CHEVRONTEXACO CORP COMMON	100.0000	8,639.00
			8,639.00
22747-0	WYETH COMMON	120.0000	5,094.00
			5,094.00
22747-0	DOW JONES & COMPANY COMMON	200.0000	9,970.00
			9,970.00
22747-0	INTERNATIONAL BUSINESS MACHINES CORP COM	400.0000	37,072.00
			37,072.00
22747-0	ALCAN INC COMMON	150.0000	7,042.50
22747-0	LUBRIZOL CORPORATION COMMON	800.0000	26,016.00
			33,058.50
22747-0	FPL GROUP COMMON	400.0000	26,168.00
			26,168.00
22747-0	DIVERSIFIED EQUITY FUND	42.0133	25,859.19
			25,859.19
			145,860.69
22747-0	WILMINGTON PRIME MM PORT-SERVICE CL	58,773.9700	58,773.97
			58,773.97
			58,773.97
			204,634.66
Total 22747-0			**204,634.66**

SEBASTIAN BRADLEY

Investment Detail (Custom)

Account: 27311-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
27311-0	CHEVRONTEXACO CORP COMMON	86.0000	7,429.54
27311-0	CONOCOPHILLIPS COMMON	107.0000	7,015.99
27311-0	EXXON MOBIL CORPORATION COMMON	314.0000	12,874.00
27311-0	HALLIBURTON COMPANY COMMON	72.0000	1,872.00
			29,191.53
27311-0	JOHNSON & JOHNSON COMMON	57.0000	2,944.62
27311-0	MEDCO HEALTH SOLUTIONS INC COMMON	13.0000	441.87
27311-0	MERCK & COMPANY COMMON	110.0000	5,082.00
27311-0	PFIZER COMMON	307.0000	10,846.31
			19,314.80
27311-0	GENERAL ELECTRIC CO COMMON	282.0000	8,736.36
27311-0	TYCO INTERNATIONAL LTD COMMON NEW	212.0000	5,618.00
			14,354.36
27311-0	AUTOMATIC DATA PROCESSING COMMON	181.0000	7,169.41
27311-0	CISCO SYSTEMS COMMON	610.0000	14,780.30
27311-0	E M C CORP MASSACHUSETTS COMMON	118.0000	1,524.56
27311-0	MOTOROLA COMMON	37.0000	518.00
			23,992.27
27311-0	AMERICAN INTERNATIONAL GROUP COMMON	118.0000	7,821.04
27311-0	BANK OF AMERICA CORP COMMON	206.0000	16,568.58
27311-0	BERKSHIRE HATHAWAY INC DEL CLASS B	9.0000	25,335.00
			49,724.62
27311-0	USAA INVESTMENT TRUST INTERNATIONAL FUND	297.1650	5,883.87
			5,883.87
27311-0	DIVERSIFIED EQUITY FUND	108.5746	66,827.67
			66,827.67
			209,289.12
27311-0	FIXED INCOME FUND	484.2491	18,924.45
			18,924.45

Investment Detail (Custom)

Account: 27311-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
			18,924.45
27311-0	WILMINGTON PRIME MM PORT-SERVICE CL	173,867.0600	173,867.06
			173,867.06
			173,867.06
			402,080.63
Total 27311-0			402,080.63

JEBSAJTIAN BRADLEY

Investment Detail (Custom)

Account: 26169-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
26169-0	CHEVRONTEXACO CORP COMMON	349.0000	30,150.11
			30,150.11
26169-0	CVS CORPORATION COMMON	400.0000	14,448.00
			14,448.00
26169-0	INTERNATIONAL BUSINESS MACHINES CORP COM	432.0000	40,037.76
			40,037.76
26169-0	ALCAN INC COMMON	300.0000	14,085.00
26169-0	FREEPORT-MCMORAN COPPER & GOLD INC CLASS B	385.0000	16,220.05
			30,305.05
26169-0	FPL GROUP COMMON	325.0000	21,281.50
26169-0	PIEDMONT NATURAL GAS COMMON	400.0000	17,364.00
			38,645.50
26169-0	CREDIT SUISSE INTERNATIONAL FOCUS FUND INC COMMON SHS	1,557.8900	16,498.06
			16,498.06
26169-0	DIVERSIFIED EQUITY FUND	220.4033	135,658.23
			135,658.23
			305,742.71
26169-0	FIXED INCOME FUND	196.0161	7,660.31
			7,660.31
			7,660.31
26169-0	WILMINGTON PRIME MM PORT-SERVICE CL	211,350.9000	211,350.90
			211,350.90
			211,350.90
			524,753.92

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Investment Detail (Custom)

Account: 26169-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
Total 26169-0			524,753.92

Activity Detail (Custom)

Account: 27311-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27311-0	Principal	RECEIPTS	Sales	11/17/2003	(42.0000)	ELECTRONIC DATA SYSTEMS CORP NEW COMMON SOLD AT 21.88 THROUGH CITATION GROUP/BCC CLEARING/M LYNCH TRADE DATE 11/12/2003	918.41
27311-0	Principal	RECEIPTS	Sales	9/3/2003	(0.1304)	CASH IN LIEU OF FRAC SHR CAPITAL GAIN MEDCO HEALTH SOLUTIONS INC COMMON	3.33
			Subtotal Sales		**(42.1304)**		**918.74**
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	AMERICAN INTERNATIONAL GROUP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	43.0000	AUTOMATIC DATA PROCESSING COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	49.0000	BANK OF AMERICA CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	2.0000	BERKSHIRE HATHAWAY INC DEL CLASS B FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	20.0000	CHEVRONTEXACO CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	145.0000	CISCO SYSTEMS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	26.0000	CONOCOPHILLIPS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	E M C CORP MASSACHUSETTS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00

Activity Detail (Custom)

Account: 27311-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	10.0000	ELECTRONIC DATA SYSTEMS CORP NEW COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	74.0000	EXXON MOBIL CORPORATION COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	67.0000	GENERAL ELECTRIC CO COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	17.0000	HALLIBURTON COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	13.0000	JOHNSON & JOHNSON COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	3.0000	MEDCO HEALTH SOLUTIONS INC COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	26.0000	MERCK & COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	9.0000	MOTOROLA COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	73.0000	PFIZER COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27311-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	50.0000	TYCO INTERNATIONAL LTD COMMON NEW FREE RECEIPT - TAX ACCOUNT TRANSFER TO SEBASTIAN LUCAS BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
			Subtotal Transfers/Additions		683.0000		0.00

Activity Detail (Custom)

Account: 27311-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27311-0	Principal	RECEIPTS	Capital Receipts	8/20/2003	10.1304	MEDCO HEALTH SOLUTIONS INC COMMON RECEIVED AS DISTRIBUTION MERCK & CO AT A RATE OF 1208 FOR 1	0.00
			Subtotal Capital Receipts		10.1304		0.00
		Subtotal RECEIPTS			551.0000		919.74
	Subtotal Principal				551.0000		919.74
Total 27311-0					551.0000		919.74

RAMONA BRADLEY

Investment Detail (Custom)

Account: 26168-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
26168-0	CHEVRONTEXACO CORP COMMON	449.0000	38,789.11
26168-0	HALLIBURTON COMPANY COMMON	600.0000	15,600.00
26168-0	IMPERIAL OIL LTD COMMON NEW	600.0000	26,652.00
			81,041.11
26168-0	AVON PRODUCTS INCORPORATED COMMON	2,000.0000	134,980.00
			134,980.00
26168-0	WYETH COMMON	1,720.0000	73,014.00
			73,014.00
26168-0	INTERNATIONAL BUSINESS MACHINES CORP COM	832.0000	77,109.76
			77,109.76
26168-0	ALCAN INC COMMON	300.0000	14,085.00
26168-0	FREEPORT-MCMORAN COPPER & GOLD INC CLASS B	385.0000	16,220.05
			30,305.05
26168-0	DOMINION RESOURCES INC VA COMMON	241.0000	15,383.03
26168-0	FPL GROUP COMMON	325.0000	21,261.50
26168-0	PIEDMONT NATURAL GAS COMMON	400.0000	17,384.00
26168-0	PINNACLE WEST CAPITAL CORP COMMON	100.0000	4,002.00
			58,030.53
26168-0	CREDIT SUISSE INTERNATIONAL FOCUS FUND INC COMMON SHS	1,557.8900	16,498.06
			16,498.06
26168-0	DIVERSIFIED EQUITY FUND	289.5909	178,243.20
			178,243.20
			649,221.71
26168-0	FIXED INCOME FUND	246.5636	9,635.71
			9,635.71
			9,635.71

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Investment Detail (Custom)

Account: 26168-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
26168-0	WILMINGTON PRIME MM PORT-SERVICE CL	261,145.8200	261,145.82
			261,145.82
			261,145.82
			920,003.24
Total 26168-0			920,003.24

KAMONA BRADLEY

Activity Detail (Custom)

Account: 26168-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	2,000.0000	AVON PRODUCTS INCORPORATED COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	100.0000	CHEVRONTEXACO CORP COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	68.4853	DIVERSIFIED EQUITY FUND FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	241.0000	DOMINION RESOURCES INC VA COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	800.0000	HALLIBURTON COMPANY COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	600.0000	IMPERIAL OIL LTD COMMON NEW FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	100.0000	PINNACLE WEST CAPITAL CORP COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
26168-0	Principal	RECEIPTS	Transfers/Additions	12/23/2003	1,720.0000	WYETH COMMON FREE RECEIPT - TAX ACCOUNT ADDITION TO ACCOUNT (FROM 22161-0)	0.00
			Subtotal Transfers/Additions		**5,429.4853**		**0.00**
		Subtotal RECEIPTS			**5,429.4853**		**0.00**
	Subtotal Principal				**5,429.4853**		**0.00**
Total 26168-0					**5,429.4853**		**0.00**

KAMONA BRADLEY

Investment Detail (Custom)

Account: 27310-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
27310-0	CHEVRONTEXACO CORP COMMON	86.0000	7,429.54
27310-0	CONOCOPHILLIPS COMMON	107.0000	7,015.99
27310-0	EXXON MOBIL CORPORATION COMMON	314.0000	12,874.00
27310-0	HALLIBURTON COMPANY COMMON	72.0000	1,872.00
			29,191.53
27310-0	JOHNSON & JOHNSON COMMON	57.0000	2,944.62
27310-0	MEDCO HEALTH SOLUTIONS INC COMMON	13.0000	441.87
27310-0	MERCK & COMPANY COMMON	110.0000	5,082.00
27310-0	PFIZER COMMON	307.0000	10,846.31
			19,314.80
27310-0	GENERAL ELECTRIC CO COMMON	282.0000	8,736.36
27310-0	TYCO INTERNATIONAL LTD COMMON NEW	212.0000	5,618.00
			14,354.36
27310-0	AUTOMATIC DATA PROCESSING COMMON	181.0000	7,169.41
27310-0	CISCO SYSTEMS COMMON	610.0000	14,780.30
27310-0	E M C CORP MASSACHUSETTS COMMON	118.0000	1,524.56
27310-0	MOTOROLA COMMON	37.0000	518.00
			23,992.27
27310-0	AMERICAN INTERNATIONAL GROUP COMMON	118.0000	7,821.04
27310-0	BANK OF AMERICA CORP COMMON	205.0000	16,488.15
27310-0	BERKSHIRE HATHAWAY INC DEL CLASS B	9.0000	25,335.00
			49,644.19
27310-0	USAA INVESTMENT TRUST INTERNATIONAL FUND	297.1650	5,883.87
			5,883.87
27310-0	DIVERSIFIED EQUITY FUND	108.5746	66,827.67
			66,827.67
			209,208.69
27310-0	FIXED INCOME FUND	484.2491	18,924.45
			18,924.45

Investment Detail (Custom)

Account: 27310-0

As of 12/31/2003

Account	Issue Description	Quantity Posted	Market Value
			18,924.45
27310-0	WILMINGTON PRIME MM PORT-SERVICE CL	173,918.2200	173,918.22
			173,918.22
			173,918.22
			402,051.36
Total 27310-0			402,051.36

RAMONA BRADLEY

Activity Detail (Custom)

Account: 27310-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27310-0	Principal	RECEIPTS	Sales	11/17/2003	(42.0000)	ELECTRONIC DATA SYSTEMS CORP NEW COMMON SOLD AT 21.88 THROUGH CITATION GROUP/BCC CLEARING/M LYNCH TRADE DATE 11/12/2003	916.39
27310-0	Principal	RECEIPTS	Sales	9/3/2003	(0.1304)	CASH IN LIEU OF FRAC SHR CAPITAL GAIN MEDCO HEALTH SOLUTIONS INC COMMON	3.33
			Subtotal Sales		**(42.1304)**		**919.72**
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	AMERICAN INTERNATIONAL GROUP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	11/3/2003	43.0000	AUTOMATIC DATA PROCESSING COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	49.0000	BANK OF AMERICA CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	2.0000	BERKSHIRE HATHAWAY INC DEL CLASS B FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	20.0000	CHEVRONTEXACO CORP COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	145.0000	CISCO SYSTEMS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	CONOCOPHILLIPS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	28.0000	E M C CORP MASSACHUSETTS COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00

Activity Detail (Custom)

Account: 27310-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	10.0000	ELECTRONIC DATA SYSTEMS CORP NEW COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	74.0000	EXXON MOBIL CORPORATION COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	67.0000	GENERAL ELECTRIC CO COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	17.0000	HALLIBURTON COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	13.0000	JOHNSON & JOHNSON COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	11/3/2003	3.0000	MEDCO HEALTH SOLUTIONS INC COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	26.0000	MERCK & COMPANY COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	9.0000	MOTOROLA COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	73.0000	PFIZER COMMON FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
27310-0	Principal	RECEIPTS	Transfers/Additions	10/31/2003	50.0000	TYCO INTERNATIONAL LTD COMMON NEW FREE RECEIPT - TAX ACCOUNT TRANSFER TO RAMONA MAE BRADLEY PER 8/17/00 DISTRIBUTION MEMO	0.00
			Subtotal Transfers/Additions		**683.0000**		**0.00**

Activity Detail (Custom)

Account: 27310-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
27310-0	Principal	RECEIPTS	Capital Receipts	8/20/2003	10.1304	MEDCO HEALTH SOLUTIONS INC COMMON RECEIVED AS DISTRIBUTION MERCK & CO. AT A RATE OF .1206 FOR 1	0.00
			Subtotal Capital Receipts		10.1304		0.00
		Subtotal RECEIPTS			651.0000		919.72
	Subtotal Principal				651.0000		919.72
Total 27310-0					651.0000		919.72

RAMONA BRADLEY

Activity Detail (Custom)

Account: 22161-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(2,000.0000)	AVON PRODUCTS INCORPORATED COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(100.0000)	CHEVRONTEXACO CORP COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(68.4853)	DIVERSIFIED EQUITY FUND FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(241.0000)	DOMINION RESOURCES INC VA COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(600.0000)	HALLIBURTON COMPANY COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(600.0000)	IMPERIAL OIL LTD COMMON NEW FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(100.0000)	PINNACLE WEST CAPITAL CORP COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0.00
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	6/19/2003		TRANSF TO DEMAND ACCT 2466-2934 JOSEPH BRADLEY JANUARY ESTIMATED TAXES APRIL TAXES AND JUNE ESTIMATED TAXES REIMBURSED TO JEB BRADLEY PER DISCRETIONARY MEMO DATED 6/19/03 FOR RAMONA BRADLEY	(508.00)
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	10/22/2003		TRANSF TO DEMAND ACCT 2466-2934 JOSEPH BRADLEY III REIMBURSEMENT FOR JOSEPH BRADLEY'S OUT OF POCKET EXPENSES FOR RAMONA BRADLEY'S SEPTEMBER ESTIMATED TAXES. PER DISCRETIONARY MEMO DATED 10/10/03	(50.00)

500

Activity Detail (Custom)

Account: 22161-0

From 01/01/2003 Thru 12/31/2003

Account	P/I	Stmnt Category	Stmnt Sub-category	Date	Quantity	Transaction Description	Amount
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/29/2003		TRANSF TO PRIN OF ACCOUNT 26168-0 EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10/28/03 (W/D FROM 22161-0 AND ADDED TO 26168-0)	(49,176.97)
22161-0	Principal	DISBURSEMENTS	Transfers/Withdrawals	12/23/2003	(1,720.0000)	WYETH COMMON FREE DELIVERY - TAX ACCOUNT EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10-28-03 (TO 26168-0)	0 00
			Subtotal Transfers/Withdrawals		(5,429.4863)		(49,734.97)
		Subtotal DISBURSEMENTS			(5,429.4863)		(49,734.97)
	Subtotal Principal				(5,429.4863)		(49,734.97)
22161-0	Income	DISBURSEMENTS	Transfers/Withdrawals	12/29/2003		TRANSF TO INC OF ACCOUNT 26168-0 EXERCISE OF RIGHT TO WITHDRAW PER DISTRIBUTION MEMO DATED 10/28/03 (W/D FROM 22161-0 AND ADDED TO 26168-0)	(5,466.87)
			Subtotal Transfers/Withdrawals		0.0000		(5,466.87)
		Subtotal DISBURSEMENTS			0.0000		(5,466.87)
	Subtotal Income				0.0000		(5,466.87)
Total 22161-0					(5,429.4863)		(55,201.84)

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 20 PM 4:10
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only) MC

Kevin Patrick Brady
(Full Name)

P.O. Box 8277 The Woodlands, TX 77387
(Mailing Address)

202-225-4901
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representative — State: TX District: 8 ☐ Officer Or Employee — Employing Office

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☑ No ☐
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C app. 4. § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 20, 2004

502

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kevin Patrick Brady

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Putnam Growth & Income Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	State of Texas Retirement System	$1,001 - $15,000		NONE	
SP	IRA Chase Security of Texas: HPQ (formerly Compaq) stock	$15,001 - $50,000		NONE	
SP	Chase Retirement Plan	$15,001 - $50,000		NONE	
SP	Chase Savings Retirement Plan 401K	$50,001 - $100,000		NONE	
SP	Chase Manhattan Employee Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kevin Patrick Brady

SP	Chase Securities Employee Stock Option Plan	$15,001 - $50,000		NONE
	Pacific Life VUL	$1,001 - $15,000		NONE
JT	Mid Cap Growth Fund A Shares	$1,001 - $15,000		NONE
JT	Chase Bank Super Savings Account	$1,001 - $15,000	INTEREST	$1 - $200
JT	Chase Bank Personal Checking Account	$1,001 - $15,000	INTEREST	$1 - $200
JT	Lexicon Genetics, Inc. Common Stock	$1 - $1,000		NONE
DC	UTMA for William Brady -Janus Funds	$1 - $1,000		NONE
JT	Putman MM Fund Cl-A	$1 - $1,000	DIVIDENDS	$1 - $200
JT	Putman Small Cap Value Fund Cl-A	$1,001 - $15,000		NONE
	Farmers New World Life Insurance	$1,001 - $15,000		NONE
SP	IRA: Putnam Mid-Cap Value Fund Cl-A	$1,001 - $15,000		NONE
	Putnam Ca Opportunities Cl-A	$1,001 - $15,000		NONE
	Am Cent VP Value I	$1,001 - $15,000		NONE
	Fidelity FVP Equity INCM Port	$1,001 - $15,000		NONE

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Kevin Patrick Brady

	EU/BERT AMT LMTMATBND Port	$15,001 - $50,000		NONE
	Oppenheimer Global SECS FD/VA IC	$1,001 - $15,000		NONE
	Drey VIF APP Port	$1,001 - $15,000		NONE
	Dreyfuss GVIT MidCap Index I	$1,001 - $15,000		NONE

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Kevin Patrick Brady

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
TransatlanticPolicy Network - U.S./Europe Dialogue, Cadiz, Spain	April 11-15	Houston-Cadiz and return	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Kevin Patrick Brady

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board Member	Montgomery County Pachyderm Club
Advisory Board Member	Women Helping Women
Advisory Board Member	Northwest Assistance Ministries
Advisory Board Member	Childrens Museum of The Woodlands
Advisory Board Member	TOMAGWA Services of Tomball

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HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

5

HAND DELIVERED
LEGISLATIVE ... REPRESENTATIVES
2004 MAY 17 PM 2:40
HC
(Office Use Only)

Robert A. Brady
(Full Name)

1301 Kimberly Drive
(Mailing Address)

Philadelphia, PA 19151-2834

Daytime Telephone (202) 225-4731

Filer Status	[Xx] Member of the U.S. House of Representatives	State: PA District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rob A Brady	5/15/04

Name ROBERT A. BRADY	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Philadelphia Writ Service	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Robert A. Brady

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock		X	X	X	P
	Examples: Simon & Schuster		Indefinite	Royalties	X	
	Examples: 1st Bank of Paducah, KY accounts		X	X	X	
	Phila Federal Credit Union		X	X	X	
SP	Phila Federal Credit Union		X	X	X	
JT	Roxborough Manyunk Savings		X	X	X	
	City of Phila (Pension)		X	Pension	X	
	PA Turnpike Commission		X	Pension	X	
	Metro Regional Council		X	Pension Ann	X	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert A. Brady

Page 4 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Phila Redevelopment Auth.					X														Pension	X											
SP	D&B Investment Inc.		X																	COMM Share	X											
SP	PA Monitoring		X																	Comm Shares	X											

This page may be copied if more space is required.

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Apr 30 04 02:55p KEB

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Part-Time Admin Asst.	Metropolitan Regional Council

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2/19/99	Metropolitan Regional Council	Part-time administrative ass't; Received no salary. MRC continues the funding and vesting of the member's pension and annuity. The 2003 total was 11,766.30.

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

Hon. Corrine Brown
(Full Name)

2444 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone
(202) 225-0123

2004 MAY 13 PM 5:09

MC

(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State: Florida District: 3	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Corrine Brown	May 13, 2004

Name Hon. Corrine Brown | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Transaction (P, S, E)
SP	Mega Corp Stock					X								X																		P
DC	Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
	Accounts Receivable for sale of; Gator Travel Agency; Emilo F. Torres, Fernando J. Alvarez, Fernando A. Alvarez (debtors) (Business is now debunked)					X											X				X											
	Bank of America			X												X							X									
	Wright Patman Conressional Federal Credit Union			X												X							X									

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			A [illegible] $10,000	C $15,001 – $50,000	D [illegible]	E $100,001 – $250,000	F [illegible]	G $500,001 – $1,000,000	H1 [illegible]	I $5,000,001 – $25,000,000	J [illegible]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wachovia Bank	Loan - Personal	X									
	Wachovia Bank	Loan - Revolving charge	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Association of American Railroads	Jan. 17-20	Orlando-Ft. Lauderdale Ft. Lauderdale-Jacksonville	Y	Y	Y	N
Association of American Railroads	Apr. 24-27	Jacksonville-Dallas-Los Angeles-Monterey	Y	Y	Y	N
New York Carib News	Nov. 7-9	Washington-Miami-Nassau	Y	Y	Y	N

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HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

2004 MAY 11 PM 1:20 (5) MC

(Office Use Only)

Henry E. Brown, Jr.
(Full Name)

P. O. Box 61886 North Charleston, SC 29419
(Mailing Address)

843-747-5802
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: SC District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Henry E Brown Jr	5-10-04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry E. Brown, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Bond-Tobacco MGMT	$50,001 - $100,000	INTEREST	$5,001 - $15,000	P
	Bonds-SC Jobs-Econ	$15,001 - $50,000	INTEREST	$1,001 - $2,500	P
	Bonds-SC ST SVC	$1,001 - $15,000	INTEREST	$201 - $1,000	P
JT	Bonds-SC State Public Ser Auth	$500,001 - $1,000,000	INTEREST	$15,001 - $50,000	
JT	Cash-Bank of America	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Cash-ING Financial Partners	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry E. Brown, Jr.

	Cash-Morgan Stanley	$15,001 - $50,000	DIVIDENDS	$5,001 - $15,000	P
JT	Cash-NBSC MM a/c	$1,001 - $15,000	INTEREST	$1 - $200	
SP	IRA-First Federal-CD's	$15,001 - $50,000	INTEREST	$201 - $1,000	
	IRA-First Federal-CD's	$100,001 - $250,000	INTEREST	$2,501 - $5,000	
	Note Receivable-IJK, Properties, LLC	$250,001 - $500,000	INTEREST	$15,001 - $50,000	
	Note Receivable-Purvis Corner, LLC	$50,001 - $100,000	INTEREST	$5,001 - $15,000	
	Real Estate-1,500 + Acres, Farm Land, Berkeley Co.	$1,000,001 - $5,000,000	RENT	$5,001 - $15,000	
	Real Estate-Harbor Square Apt-Washington, DC	$100,001 - $250,000	RENT	NONE	P
	Rental Real Estate-1129 Yeamans Hall Road	$15,001 - $50,000	RENT	$2,501 - $5,000	
	Rental Real Estate-1212 Pine Ct	$50,001 - $100,000	RENT	$5,001 - $15,000	
	Rental Real Estate-1432 Watershed Ct.	$50,001 - $100,000	RENT	NONE	
	Rental Real Estate-5815 Hume Avenue	$50,001 - $100,000	RENT	$5,001 - $15,000	
	Stock-Bell South	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	PE
JT	Stock-Delta Airline	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Henry E. Brown, Jr.

	Stock-Duke Energy	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	PE
JT	Stock-Ford Motor Co.	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Stock-Greenbax Enterprises	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Stock-Home Depot	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Stock-IBM Corp.	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Stock-Lucent Tech.	$15,001 - $50,000	DIVIDENDS	NONE	
	Stock-Nucor Corp.	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	PE
JT	Stock-Pfizer	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Stock-Wachovia Corp.	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	PE

SCHEDULE IV - TRANSACTIONS

Name Henry E. Brown, Jr.

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Bell South Stock	E	3-17-2003	$15,001 - $50,000
	Duke Energy Stock	E	3-17-2003	$15,001 - $50,000
JT	Scana Corp. Stock	S	6-30-2003	$15,001 - $50,000
JT	General Electric Stock	S	6-30-2003	$1,001 - $15,000
	Nucor Corp. Stock	E	3-17-2003	$15,001 - $50,000
	Wachovia Corp. Stock	E	3-17-2003	$15,001 - $50,000
JT	Cisco Stock	S	6-30-2003	$15,001 - $50,000
	Piggly Wiggly Carolina Stock	E	3-17-2003	$100,001 - $250,000
	Tobacco MGMT Bond	P	3-17-2003	$50,001 - $100,000
	SC Jobs-Econ Bonds	P	3-2003	$15,001 - $50,000
	SC ST SVC-B Bonds	P	3-2003	$1,001 - $15,000
	Real Estate-Harbor Square Apt-Washington, DC	P	6-2003	$100,001 - $250,000

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 2:21
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(7)

Sherrod Brown
(Full Name)

2625 E. Erie
Lorain OH 44052
(Mailing Address)

202.225.3401
Daytime Telephone:

HAND DELIVERED

Filer Status	☒ Member of the U.S. House of Representatives	State: OH District: 13	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sherrod Brown	May 2004

Name Sherrod Brown	Page of

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
State of OH Deferred Comp	deferred inc	10,691.10
Kent State University	book royalties	325.36

For payments to charity in lieu of honoraria, use Schedule II.

Name Sherrod Brown	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NJ Medical School Natl Tuberculosis Center	Speech	May 1, 2003	1,000.

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Name Sherrod Brown | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B											Block C							Block D											Block E
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X										X							P
			Simon & Schuster			Indefinite															Royalties								X			
			1st Bank of Paducah, KY accounts					X									X									X						
	Fidelity Magellan Ord				X										X											N/A						
	Muhlenkamp	WI				X									X							X										
	Bramwell Growth	NY				X									X							X										
	Am Century	MO				X									X							X										
	Ariel Fund	MO				X									X							X										
	Cong. Credit Union	DC					X										X								X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Sherrod Brown | Page of

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Lorain Natl Bank Oh			X												X						X										
	Calvert Social Inv Oh			X										X								X										
	Oak Technology Mo			X										X								X										
	Oak Growth Mo			X										X							X											
	Oak Aggressive Mo			X										X							X											
	Ohio PERS			X												X					X											
	Nationwide (ret) Oh			X										X											N/A							
	Brunlea Farm Oh				X										X										N/A							
	AOL			X										X							X											

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SCHEDULE IV — TRANSACTIONS

Name Sherrod Brown | Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Navellier Sm Cap NV		X		10-31-03	X									

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Name Sherrod Brown | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Commonwealth Fund / Harvard U	Jan 16-18	Clev - Miami - Clev	Y	Y	N	N
	Partners in Health	Apr 15-17	Phil - Port au Prince - Clev	Y	Y	N	N
	Natl TB Center / NJ Medical	May 1-2	DC - Newark - DC	Y	Y	N	N
	Aspen Institute	Aug 10-16	Clev - Moscow - Clev	Y	Y	Y	N
	Faith & Politics Institute	Sept 13-14	DC - Potomac, MD - DC	Y	Y	N	N
	Center for Latin Am Studies	Sept 19-21	Clev - San Fran - Clev	Y	Y	N	N
	Aspen Institute	Dec 4-7	Clev - Mexico - Clev	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
(12)
2004 MAY 14 PM 1:49
MC
OFFICE OF THE CLERK
(Office Use Only)

Virginia "Ginny" Brown-Waite
(Full Name)

2499 Culbreath Road Brooksville, FL 34602
(Mailing Address)

202-225-1002
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: FL District: 05 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ginny Brown Waite	05/06/04

SCHEDULE I - EARNED INCOME

Name Virginia "Ginny" Brown-Waite

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Florida, Tallahassee FL	Pensions	$13,471
State of New York, Albany New York	Spouse Pension	$18,400
State of New York, Defferred Compensation	Deferred Compensation	$1,346
Stewart Enterprises Inc., Jefferson, LA	Salary	$2,564
State of NY, Albany NY	Pension	$17,626
Social Security	Spouse Social Security	$12,420

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	NYS Deferred Compensation; MSIF Trust Portfolio	$1,001 - $15,000	Growth	N/A	
	NYS Deferred Compensation; Fidelity Magellan	$15,001 - $50,000	Growth	N/A	
	NYS Deferred Compensation; Fidelity OTC Fund	$1,001 - $15,000	Growth	N/A	
	NYS Deferred Compensation; Vanguard Ins. Index	$1,001 - $15,000	Growth	N/A	
JT	Cortez Comm. Bank	$1,001 - $15,000	none	n/a	
JT	Putnam Tx Exempt	$1 - $1,000	Dividends	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

Deferred Comp. Hartford; Janus Worldwide	$1,001 - $15,000	Growth	n/a
Deferred comp. Hartford; Putnam Vista	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; Janus Twenty	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; AM Century Ultra	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; Hartford Div. & Growth	$1,001 - $15,000	Growth	n/a
National Deferred; Fixed Cash Acct.	$1,001 - $15,000	Interest	$1 - $200
National Deferred; T.Rowe Price Science & Tech	$1,001 - $15,000	Growth	n/a
National Deferred; Janus Worldwide	$1,001 - $15,000	Growth	n/a
National Deferred; Dreyfus. Prem 3rd Century	$1,001 - $15,000	Growth	n/a
National Deferred; Fidelity Contrafund	$1,001 - $15,000	Growth	n/a
National Deferred; Janus Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; Templeton Forgein Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; WM Smallcap Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; Brandywine Fund	$1 - $1,000	Growth	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	Nationwide Deferred; MSIF Midcap Growth	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Fidelity Contrafund	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Fidelity Magellan	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Legg-Mason Value	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; AMER. Century Growth	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; AMER Century Ultra	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Waddell & Reed	$1 - $1,000	Growth	n/a
SP	Travellers IRA; Growth & Income Fund	$1,001 - $15,000	Growth	n/a
SP	Travellers IRA; Dreyfus Stock Ind.	$1,001 - $15,000	Growth	n/a
SP	Travellers IRA; Capital Appr. Fund	$1,001 - $15,000	Growth	n/a
	H & R Sep. IRA; Harmonic	$1 - $1,000	Growth	n/a
	H & R Sep. IRA; Microsoft	$1,001 - $15,000	Growth	n/a
	H & R Sep. IRA; Bandwith PortTrust	$1 - $1,000	Growth	n/a
	H& R Sep. IRA; Money Market	$15,001 - $50,000	Interest	$1 - $200

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	H&R Block IRA; General Electric	$1,001 - $15,000	Growth	n/a
	H&R Block IRA; Jabil Circuit	$1,001 - $15,000	Growth	n/a
	H&R Block IRA; Money Market	$1 - $1,000	Interest	n/a
SP	Etrade IRA; Cisco	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Jabil	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Stewart Ent.	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Tech Data	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Time Warner	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Tyco	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; AT&T Wireless	$1 - $1,000	Growth	n/a
	Ameritrade IRA; Putnam Voyager	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; SBC Communications	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; Money Market	$1,001 - $15,000	Interest	$1 - $200
	Dreyfus IRA; Dreyfus Growth Oppor.	$1,001 - $15,000	Growth	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	Dreyfus IRA; Dreyfus Small Co.	$1,001 - $15,000	Growth	n/a	
	Dreyfus IRA; Dreyfus Midcap	$1,001 - $15,000	Growth	n/a	
	Thrift Savings Plan; G-Fund	$1,001 - $15,000	Interest	$1 - $200	
	Thrift Savings Plan; S-Fund	$1,001 - $15,000	Growth	n/a	
JT	Cong. Federal Union	$1,001 - $15,000	Interest	$1 - $200	
	H&R Block; Cash	$1 - $1,000		n/a	
JT	John Hancock;	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Home Depot	$1,001 - $15,000	Growth	n/a	
JT	Walmart	$1,001 - $15,000	Growth	n/a	
JT	Torch Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
JT	John Hancock Govt. Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Etrade; Indymac Bancorp	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Etrade; Avaya Inc	$1 - $1,000	Growth	n/a	
JT	Etrade; Money Market	$1 - $1,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

JT	Franklin Templeton; Growth Fund	$1,001 - $15,000	Growth	n/a	
JT	Franklin Templeton; Sector Fund	$1,001 - $15,000	Growth	n/a	
JT	Hernando Tx Certs	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
JT	Discover Money Market	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	World Savings Money Market	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Bank of America	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Bentley Pharmaceuticals	None		n/a	S
JT	Rental Income; DC Property	$1,001 - $15,000	Rental	$5,001 - $15,000	
JT	DC Property; 408 F Street NE, Washington, D.C.	$500,001 - $1,000,000		n/a	
JT	Ellijay, GA, Pink Branch Trace	None	Sale	n/a	S
JT	Walnut Mtn, Ellijay GA	None	Sale	n/a	S
JT	Lot-Ellijay, GA	$15,001 - $50,000		n/a	
JT	2 lots- Shallotte, NC	$15,001 - $50,000		n/a	
SP	Hungry Harv's Note	None	INTEREST	$1,001 - $2,500	Paid off

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

JT	6119 Schallenkamp Mortage: Spring Hill, FL	None	INTEREST	$201 - $1,000	Paid off
JT	1959 MG Collector Car	$1,001 - $15,000		n/a	
JT	US Savings Bonds	$1,001 - $15,000		n/a	
JT	4 vechicles	$50,001 - $100,000		n/a	

SCHÈDULE IV - TRANSACTIONS

Name Virginia "Ginny" Brown-Waite

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Torch Enegry Trust	S	12-31-2003	$1,001 - $15,000
JT	Bentley Pharmaceuticals	S	9-29-2003	$1,001 - $15,000
JT	Ellijay, GA	S	7-7-2003	$100,001 - $250,000
JT	Walnut Mtn., Ellijay, GA	S	2-14-2003	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name Virginia "Ginny" Brown-Waite

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Bank of America	Mortgage of 408 F Street, Washington D.C.	$500,001 - $1,000,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Virginia "Ginny" Brown-Waite

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
AIPAC	Aug. 23-31	Tampa, FL--Jerusalem, Israel--Tampa, FL	Y	Y	Y	N/A
Community Financial Services of America Annual Conference	Feb. 28-March 1	Washington, Dc.--Palm Beach, FL--Washington, D.C.	Y	Y	N	N/A
American Bakers' Association	March 3	Tampa, FL--Fort Lauderdale, FL--Washington D.C.	N	N	N	N/A

GINNY BROWN-WAITE
5TH DISTRICT, FLORIDA

COMMITTEE ON THE BUDGET

COMMITTEE ON
FINANCIAL SERVICES

COMMITTEE ON
VETERANS' AFFAIRS

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515

1516 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-1002

DISTRICT OFFICES
20 NORTH MAIN STREET, SUITE 200
BROOKSVILLE, FL 34601
(352) 799-8354
(866) GWAITE5

38008 MERIDIAN AVENUE, SUITE A
DADE CITY, FL 33525
(352) 567-6707
(866) GWAITE5

June 14th, 2004

Office of the Clerk
U.S. House of Representatives
Legislative Resource Center
B106 CHOB
Washington, D.C. 20515

MC

To Whom It May Concern:

Enclosed please find an amendment to my Financial Disclosure statement for 2003. In the event that there are any discrepancies between 2003 and 2002, please also treat this as an amendment to 2002 as well. Thank you.

Sincerely,

Ginny Brown-Waite

Ginny Brown-Waite
Member of Congress

13

2004 JUN 14 PM 3:23

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page 1 of 12

2004 JUN 14 PM 3:23
(Office Use Only)

Virginia "Ginny" Brown-Waite
(Full Name)

2499 Culbreath Road Brooksville, FL 34602
(Mailing Address)

202-225-1002
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: FL — District: 05 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

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Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Ginny Brown-Waite	6/14/04

SCHEDULE I - EARNED INCOME

Name Virginia "Ginny" Brown-Waite

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Social Security	Spouse Social Security	$12,420

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
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	NYS Deferred Compensation; Fidelity Magellan	$15,001 - $50,000	Growth	N/A	
	NYS Deferred Compensation; Fidelity OTC Fund	$1,001 - $15,000	Growth	N/A	
	NYS Deferred Compensation; Vanguard Ins. Index	$1,001 - $15,000	Growth	N/A	
JT	Cortez Comm. Bank	$1,001 - $15,000	none	n/a	
JT	Putnam Tx Exempt	$1 - $1,000	Dividends	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

Deferred Comp. Hartford; Janus Worldwide	$1,001 - $15,000	Growth	n/a
Deferred comp. Hartford; Putnam Vista	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; Janus Twenty	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; AM Century Ultra	$1,001 - $15,000	Growth	n/a
Deferred Comp. Hartford; Hartford Div. & Growth	$1,001 - $15,000	Growth	n/a
National Deferred; Fixed Cash Acct.	$1,001 - $15,000	Interest	$1 - $200
National Deferred; T.Rowe Price Science & Tech	$1,001 - $15,000	Growth	n/a
National Deferred; Janus Worldwide	$1,001 - $15,000	Growth	n/a
National Deferred; Dreyfus. Prem 3rd Century	$1,001 - $15,000	Growth	n/a
National Deferred; Fidelity Contrafund	$1,001 - $15,000	Growth	n/a
National Deferred; Janus Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; Templeton Forgein Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; WM Smallcap Fund	$1,001 - $15,000	Growth	n/a
Nationwide Deferred; Brandywine Fund	$1 - $1,000	Growth	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	Nationwide Deferred; MSIF Midcap Growth	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Fidelity Contrafund	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Fidelity Magellan	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Legg-Mason Value	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; AMER. Century Growth	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; AMER Century Ultra	$1,001 - $15,000	Growth	n/a
	Nationwide Deferred; Waddell & Reed	$1 - $1,000	Growth	n/a
SP	Travellers IRA; Growth & Income Fund	$1,001 - $15,000	Growth	n/a
SP	Travellers IRA; Dreyfus Stock Ind.	$1,001 - $15,000	Growth	n/a
SP	Travellers IRA; Capital Appr. Fund	$1,001 - $15,000	Growth	n/a
	H & R Sep. IRA; Harmonic	$1 - $1,000	Growth	n/a
	H & R Sep. IRA; Microsoft	$1,001 - $15,000	Growth	n/a
	H & R Sep. IRA; Bandwith PortTrust	$1 - $1,000	Growth	n/a
	H& R Sep. IRA; Money Market	$15,001 - $50,000	Interest	$1 - $200

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	H&R Block IRA; General Electric	$1,001 - $15,000	Growth	n/a
	H&R Block IRA; Jabil Circuit	$1,001 - $15,000	Growth	n/a
	H&R Block IRA; Money Market	$1 - $1,000	Interest	n/a
SP	Etrade IRA; Cisco	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Jabil	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Stewart Ent.	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Tech Data	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Time Warner	$1,001 - $15,000	Growth	n/a
SP	Etrade IRA; Tyco	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; AT&T Wireless	$1 - $1,000	Growth	n/a
	Ameritrade IRA; Putnam Voyager	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; SBC Communications	$1,001 - $15,000	Growth	n/a
	Ameritrade IRA; Money Market	$1,001 - $15,000	Interest	$1 - $200
	Dreyfus IRA; Dreyfus Growth Oppor.	$1,001 - $15,000	Growth	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

	Dreyfus IRA; Dreyfus Small Co.	$1,001 - $15,000	Growth	n/a	
	Dreyfus IRA; Dreyfus Midcap	$1,001 - $15,000	Growth	n/a	
	Thrift Savings Plan; G-Fund	$1,001 - $15,000	Interest	$1 - $200	
	Thrift Savings Plan; S-Fund	$1,001 - $15,000	Growth	n/a	
JT	Cong. Federal Union	$1,001 - $15,000	Interest	$1 - $200	
	H&R Block; Cash	$1 - $1,000		n/a	
JT	John Hancock;	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Home Depot	$1,001 - $15,000	Growth	n/a	
JT	Walmart	$1,001 - $15,000	Growth	n/a	
JT	Torch Energy	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
JT	John Hancock Govt. Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Etrade; Indymac Bancorp	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Etrade; Avaya Inc	$1 - $1,000	Growth	n/a	
JT	Etrade; Money Market	$1 - $1,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

JT	Franklin Templeton; Growth Fund	$1,001 - $15,000	Growth	n/a	
JT	Franklin Templeton; Sector Fund	$1,001 - $15,000	Growth	n/a	
JT	Hernando Tx Certs	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
JT	Discover Money Market	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	World Savings Money Market	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Bank of America	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Bentley Pharmaceuticals	None		n/a	S
JT	Rental Income; DC Property	$1,001 - $15,000	Rental	$5,001 - $15,000	
JT	DC Property; 408 F Street NE, Washington, D.C.	$500,001 - $1,000,000		n/a	
JT	Ellijay, GA, Pink Branch Trace	None	Sale	n/a	S
JT	Walnut Mtn, Ellijay GA	None	Sale	n/a	S
JT	Lot-Ellijay, GA	$15,001 - $50,000		n/a	
JT	2 lots- Marsh Hen Drive Shallotte, NC	$15,001 - $50,000		n/a	
SP	Hungry Harv's Note	None	INTEREST	$1,001 - $2,500	Paid off

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Virginia "Ginny" Brown-Waite

JT	6119 Schallenkamp Mortage: Spring Hill, FL	None	INTEREST	$201 - $1,000	Paid off
JT	1959 MG Collector Car	$1,001 - $15,000		n/a	
JT	US Savings Bonds	$1,001 - $15,000		n/a	

SCHEDULE IV - TRANSACTIONS

Name Virginia "Ginny" Brown-Waite

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Torch Enegry Trust	S	12-31-2003	$1,001 - $15,000
JT	Bentley Pharmaceuticals	S	9-29-2003	$1,001 - $15,000
JT	Ellijay, GA	S	7-7-2003	$100,001 - $250,000
JT	Walnut Mtn., Ellijay, GA	S	2-14-2003	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name Virginia "Ginny" Brown-Waite

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	*Creditor	Type of Liability	Amount of Liability
JT	Bank of America	Mortgage of 408 F Street, Washington D.C.	$500,001 - $1,000,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Virginia "Ginny" Brown-Waite

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
AIPAC	Aug. 23-31	Tampa, FL--Jerusalem, Israel--Tampa, FL	Y	Y	Y	N/A
Community Financial Services of America Annual Conference	Feb. 28-March 1	Washington, Dc.--Palm Beach, FL--Washington, D.C.	Y	Y	N	N/A
American Bakers' Association	March 3	Tampa, FL--Fort Lauderdale, FL--Washington D.C.	N	N	N	N/A

MAY 29 2004

HOUSE OF REPRESENTATIVES
WASHINGTON, D. C. 20515

LEGISLATIVE RESOURCE CENTER
2004 JUN 10 PM 2:53
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U.S. HOUSE OF REPRESENTATIVES

(1)

MC

May 28, 2004

Jeff Trandahl, Clerk of the House
Legislative Resource Center
B106 Cannon HOB
Washington, D.C. 20515

Dear Clerk of the House:

After inadvertently omitting information from my 2003 Financial Disclosure Form, I am submitting this amendment to include that information.

Under Section III, please note that K2 Inc. (listed in error as US2 Inc.) was a purchase on February 6, 2003. Also, under schedule IV (transactions) it should be listed as a purchase and section B should be marked as the amount of the transaction.

Should you need any additional information regarding this inadvertent omission, please contact me.

Sincerely,

Dan Burton, M.C.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

Othell Maxie Burns
(Full Name)
5417 Newington Hwy.
(Mailing Address)
Sylvania, Georgia 30467
Daytime Telephone (912) 863-4012

Filer Status	[X] Member of the U.S. House of Representatives — State: Georgia District: 12	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Othell Maxie Burns	June 10, 2004

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Othell Marie Burns

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A	Block B												Block C							Block D											Block E
	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT — Examples: SP Mega Corp Stock					X								X										X								P
Examples: Simon & Schuster		Indefinite																	Royalties									X			
Examples: JT 1st Bank of Paducah, KY accounts						X									X																
59.27 acres, map 136 parcel 4 Screven County, GA					X														farmland					X							
5.78 acres, map 136, parcel 5 Screven County, GA				X															"						X						
96.32 acres, map 136, parcel 69 Screven County, GA					X														"												
33.5 acres, map 135, parcel 7 Screven County, Georgia				X															"												
Farmers and Merchants Bank I.R.A. Certificate of Deposit			X												X				IRA	X											
Farmers and Merchants Bank Certificate of Deposit			X												X				CD	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Othell Maxie Burns

Page 3 of 6

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Timber sold off existing 96 acres farmland																															
	Broodstock cattle	X															X										X					S
	Farm equipment (truck & other) used on farm	X															X						X									S
	Cattle inventory				X															receipts						X						
	Loan receivable (Burns Campaign)				X																X											
	Annuity Board of Southern Baptist Assoc. Convention Global Equity Fund						X							X						retirement						X						
	Money Market Fund					X										X				retirement				X								

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SCHEDULE IV — TRANSACTIONS

Name Othell Marie Burns

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-03		X								
	timber		X		5-28-03		X								
	periodic cattle		X		various	X									

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Name Othell Maxie Burns | Page 5 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Farmers and Merchants Bank of Sylvania, GA	mortgage on 33 acres farmland			X							
	Farmers and Merchants Bank of Sylvania, GA	mortgage on 59 acres farmland		X								
	Farmers and Merchants Bank of Sylvania, GA	mortgage on 96 acres farmland		X								
	Wachovia of Wilmington, DE	Credit card	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
American Israel Education Foundation (attached)	Aug 23-31	Savih, GA-Israel-Savih, GA	Y	Y	Y	N

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Jun-01-04 08:28am From- T-710 P 002/002 F-576

ATTACHMENT
SCHEDULE VII

OTHELL MAXIE BURNS

X Original ___ Amendment

U.S. House of Representatives

MEMBER/OFFICER TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk is to make these forms available to the public as soon as possible after they are filed. *Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.*

Name of Member or Officer (print or type): Max Burns

Name of accompanying family member (if any): Lora Burns

Relationship to Member/Officer (check one): ✓ spouse ___ child

Dates of Travel: Aug 23, 2003 – August 31, 2003

Dates at personal expense: N/A

Itinerary (Point of departure – destination – return): Savannah, Georgia to Israel. Return to Savannah, Georgia.

Sponsor (Who paid for the trip): American Israel Education Foundation

Purpose of Trip: Education Mission

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses
For Member or Officer:	3785.40	646.00	465.7[illegible]
For accompanying spouse or child:	3785.40	646.00	465.[illegible]

	Other expenses (dollar amount)	Nature of expenses (e.g., taxi, parking, registration fee, etc.)
For Member or Officer:	610.16	Security Costs
For accompanying spouse or child:	610.16	Security Costs

I have determined that all of the expenses listed above were necessary and that the travel was in connection with my duties as a Member or Officer of the U.S. House of Representatives and would not create the appearance that I am using public office for private gain.

SIGNATURE OF MEMBER OR OFFICER: Max Burns

DATE: September 26, 2003

Version date 4/2003 by Committee on Standards of Official Conduct

2003 SEP 29 AM 10: 32
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
LEGISLATIVE RESOURCE CENTER

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 14 AM 11:36
HC
(Office Use Only)

Richard Mauze Burr
(Full Name)

2634 Forest Drive Winston-Salem, NC 27104
(Mailing Address)

202-225-2071
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: NC District: 05	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	R M Burr	5-13-04

SCHEDULE I - EARNED INCOME

Name Richard Mauze Burr

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Graham and Boles Realty	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Richard Mauze Burr

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	BB&T Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	Goldman Sachs Equity	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Cisco Systems Stock	$15,001 - $50,000	DIVIDENDS	NONE	
SP	Edward D. Jones Cash	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	Graham & Boles Realty (real estate services, Winston-Salem, NC)	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	P
SP	Piedmont Triad Mortgage (home mortgage services, Winston-Salem, NC)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Richard Mauze Burr

SP	Piedmont Relocation Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Wachovia Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
DC	Edward D. Jones Cash	$1,001 - $15,000	INTEREST	$1 - $200	
DC	BB&T Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Small Cap Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Lord Abbot Dev Growth	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Edward D. Jones Cash	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Wachovia Checking	$1 - $1,000	INTEREST	$1 - $200	
	BB&T Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Cisco Stock	$50,001 - $100,000	DIVIDENDS	NONE	
	Corning Stock	$15,001 - $50,000	DIVIDENDS	NONE	
	Sun Microsystems Stock	$1,001 - $15,000	DIVIDENDS	NONE	
JT	Southern Community Bank	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	450 New Jersey Ave. SE, Washington DC residence	$500,001 - $1,000,000	RENT	$5,001 - $15,000	P

SCHEDULE IV - TRANSACTIONS

Name Richard Mauze Burr

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Wachovia Stock	P	3-12-03	$1,001 - $15,000
SP	BB&T Stock	P	3-12-03	$1,001 - $15,000
SP	Graham & Boles Realty Stock	P	5-28-03	$15,001 - $50,000
SP	Piedmont Triad Mortgage Stock	P	5-28-03	$1,001 - $15,000
SP	Piedmont Relocation Stock	P	5-28-03	$1,001 - $15,000
JT	450 New Jersey Avenue SE, Washington DC	P	9-30-03	$500,001 - $1,000,000

SCHEDULE V - LIABILITIES

Name Richard Mauze Burr

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Wells Fargo	Mortgage on 450 New Jersey Ave. SE, Washington DC	$250,001 - $500,000

SCHEDULE VIII - POSITIONS

Name Richard Mauze Burr

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Co-Chair	Partnership for Drug Free North Carolina
Board Member	Brenner's Children Hospital
Board Member	Idealliance

RICHARD BURR
5TH DISTRICT, NORTH CAROLINA

Richard.BurrNC05@mail.house.gov
http://www.house.gov/burr

COMMITTEE ON ENERGY AND COMMERCE

SELECT COMMITTEE ON
INTELLIGENCE

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 12: 06
U.S. HOUSE OF REPRESENTATIVES

Congress of the United States
House of Representatives
Washington, DC 20515–3305 **HAND DELIVERED**

May 17, 2004

The Honorable Jeff Trandahl
Office of the Clerk
c/o Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515

Dear Mr. Trandahl:

Please allow this letter and its attachment to serve as an amendment to my Personal Financial Disclosure statement for the calendar year 2003. In the copy filed on May 14, 2004, I inadvertently omitted a travel payment made by the North Carolina Tobacco Growers Association on February 7, 2003. The travel was in conjunction with a speech I gave to the Association's annual meeting.

Thank you for your attention to this amendment to my 2003 Personal Financial Disclosure statement. If you have any questions, please contact my Policy Director, Christopher Joyner, at (202) 225-2071.

Sincerely,

Richard Burr
Member of Congress

RB:cj

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WILKESBORO, NC 28697
(336) 667-7418
FAX (336) 667-7419

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SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Richard Mauze Burr

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Tobacco Growers Association of North Carolina	February 7, 2003	Greenbrier, WV -- Raleigh, NC – Greenbrier, WV	N	N	N	N/A

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 5:05
MC
(Office Use Only)

Danny Lee Burton
(Full Name)
2185 Rayburn HOB
(Mailing Address)
Washington DC
Daytime Telephone: 202 225-2276

Filer Status	☒ Member of the U.S. House of Representatives — State: IN District: 5th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Danny L Burton	5/15/04

Name Dan L. Burton | Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$200
Cancer Treatment Centers of America	Speech	10/9-10/03	$1000

[illegible] attached if more space is required.

Name Dan L. Burton

Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Excludes: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for Income. For all other assets, indicate the category of Income by checking the appropriate box below. Dividends, even if reinvested, should be listed as Income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Owner	Asset and/or Income Source	A None	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I Over $5,000,000	J DIVIDENDS	K INTEREST	L RENTS AND ROYALTIES	M Other Type of Income (Specify: Rent, Royalties, Partnership Income, etc.)	I None	II $1,001 – $2,500	III $2,501 – $5,000	IV $5,001 – $15,000	V $15,001 – $50,000	VI $50,001 – $100,000	VII $100,001 – $1,000,000	VIII $1,000,001 – $5,000,000	IX $5,000,001 – $25,000,000	X Over $25,000,000	P, S, E
SP	Mega Corp. Stock				X						X														P
DC	Steven & Schuster		Institute											Royalties								X			
JT	1st Bank of Paducah, KY accounts											X													
	Russell Frank Inst Co. Lifepoints Balanced Strategy Fund Cl C					X					X							X							
	AGNICO Eagle Mines			X							X				X										
	Barrick Gold Co			X							X				X										
	Canyon Resources	X									X				X										
	Corvisa Corp	X									X				X										

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name Dan L. Burton Page 4 of 8

SP, DO, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001-$15,000	E $15,001-$50,000	G $50,001-$100,000	I $100,001-$250,000	K $250,001-$500,000	BLOCK C Type of Income: DIVIDEND	INTEREST	RENT/ROYALTY	CAPITAL GAIN	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $1,001-$2,500	V $2,501-$5,000	VII $5,001-$15,000	IX $15,001-$50,000	XI Over $50,000	BLOCK E Transaction: P, S, E
	Full House Resorts		X					X					X						
	USA Inc							X					X						
	Microsoft Corp		X					X						X					
	Newmont Mining		X					X						X					
	Nuveen Municipal		X					X						X					

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (If needed)

Name: Dan L. Burton — Page 5 of 8

SCHEDULE III Item No.	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,000 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	BLOCK C Type of Income: Dividends	Interest	Rent	Royalty or Trust	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $250,000	X Over $250,000	BLOCK E Transaction: Type of Transaction
	Harting Farm, Laurel Co. Ky (20 Acres)														X										
	Residential Rentals 2176 - 2181 Galaxy Franklin, IN							X																	
	Burton Ranch Johnson Co (11.84 A)							X							X										
	Johnson Co (22.7 A)							X							X										
	Flat Creek Ky (4 acres)														X										
	Country View Estates (1 Acre)																			X					6

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SCHEDULE IV — TRANSACTIONS

Name: Dan L. Burton

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	Example: Mega Corporation Common Stock	X			10-12-08		X								
	Country View Estates (1 Acre)		X		11/30/09		X								

This page may be copied if more space is required.

DAN. BURTON. FOR. CONGRESS 3175435673

P.08

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Royoroft Corporation	Aug. 9–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Cancer Treatment Centers	10/9/03 10/10/03	Indpls - Chicago - Indpls	N	N	N	N
National Nutritional Food Assn	6/27-30/03	DC - Las Vegas - DC	Y	N	N	N
Chinese Intl Economic Cooperation Assn.	Dec 6-12 Dec 17-18 2003	DC - Taiwan - DC	Y	Y	N	N

DAN.BURTON.FOR.CONGRESS 3175465675

Name: Dan L. Burton | Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consultant (uncompensated)	The Burton Agency
Hon. Chairman	National Defense Council Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

MAY 17 2004

(8)

Danny Lee Burton
(Full Name)

2185 Rayburn HOB
(Mailing Address)

Washington DC
Daytime Telephone: 202) 225-2276

MC 2004 MAY 25 PM 12:44
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State: IN District: 5th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Danny L Burton	5/15/04

579

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$800
Cancer Treatment Centers of America	Speech	10/9-10/03	$1000

[illegible] may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Dan L. Burton

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Excludes: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A	SP, DC, JT	Block B	Block C	Block D	Block E
		None; A; B; C; D; E; F; G; H; I; J; K; L	DIVIDENDS; RENTS; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None; I; II; III; IV; V; VI; VII; VIII; IX; X; XI	P, S, E
Examples: Mega Corp. Stock	SP	X	X	X	P
Simon & Schuster		Indefinite	Royalties	X	
1st Bank of Paducah, KY accounts			X	X	
Russell Frank Invt Co. 4 Repoints Balanced Strategy Fund Cl C		X	X	X	
AGNICO Eagle Mines		X	X	X	
Barrick Gold Co		X	X	X	
Canyon Resources		X	X	X	
Corixa Corp		X	X	X	

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name Dan L. Burton

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $50,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Full House Resorts		X					X				X						
	USR Inc			X				X				X						
	Microsoft Corp		X					X					X					
	Newmont Mining		X					X					X					
	Nuveen Municipal		X					X					X					

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (If needed)

Name: Dan L. Burton

SP, DO, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $10,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Harting Farm, Laurel Co. Ky (20 acres)								X			X						
	Residential Rentals 2176 – 2181 Galaxy Franklin, IN				X				X					X				
	Burton Ranch Johnson Co (11.84A)				X							X						
	Johnson Co (23.7A)				X				X			X		X				
	Flat Creek Ky (46.40A)											X						
	Country View Estates (1 Acre)		X												X			S

SCHEDULE IV — TRANSACTIONS

Name Dan L. Burton

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Country View Estates (1 Acre)		X		11/30/03		X								

This page may be copied if more space is required.

Name Dan L. Burton | Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Cancer Treatment Centers	10/9/08 10/10/03	Indpls - Chicago - Indpls	N	N	N	N
	National Nutritional Food Assn	6/27-30/08	DC - Las Vegas - DC	Y	N	N	N
	Chinese Intl Economic Cooperation Assn.	Dec 6-12 Dec 17-18 2003	DC - Taiwan - DC	Y	Y	N	N

Name	Dan L. Burton	Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consultant (uncompensated)	The Burton Agency
Hon. Chairman	National Defense Council Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

DAN BURTON
5TH DISTRICT, INDIANA

COMMITTEES
GOVERNMENT REFORM
FORMER CHAIRMAN (1997-2002)
SUBCOMMITTEES:
HUMAN RIGHTS AND WELLNESS
CHAIRMAN
NATIONAL SECURITY, EMERGING THREATS AND INTERNATIONAL RELATIONS

INTERNATIONAL RELATIONS
SUBCOMMITTEES:
EUROPE
ASIA AND THE PACIFIC

Congress of the United States
House of Representatives
Washington, DC 20515–1405

WASHINGTON OFFICE
2185 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-1405
TELEPHONE: (202) 225-2276

DISTRICT OFFICES
8900 KEYSTONE AT THE CROSSING
INDIANAPOLIS, IN 46240
TELEPHONE: (317) 848-0201
TOLL-FREE: (800) 382-6020

208 SOUTH WASHINGTON STREET
MARION, IN 46952
TELEPHONE: (765) 662-6770
TOLL-FREE: (877) 846-2938

www.house.gov/burton

HAND DELIVERED

May 28, 2004

(1)

2004 MAY 28 PM 4:04
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Jeff Trandahl, Clerk of the House
Legislative Resource Center
B106 Cannon HOB
Washington, D.C. 20515

Dear Clerk of the House:

After inadvertently omitting information from my 2003 Financial Disclosure Form, I am submitting this amendment to include that information.

Under Section III, please note that K2 Inc (listed in error as US2 Inc.) was a purchase on February 6, 2003. Also, under schedule IV (transactions) it should be listed as a purchase and section B should be marked as the amount of the transaction.

Should you need any additional information regarding this inadvertent omission, please contact me.

Sincerely,

Dan Burton, M.C.

HAND DELIVERED
(6)
LEGISLATIVE RESOURCE CENTER
2004 MAY 14 AM 11:52
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Stephen Earle Buyer
(Full Name)

2230 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-5037
Daytime Telephone:

(Office Use Only)

A $200 penalty shall be assessed against anyone who files more than 30 days late.

Filer Status: ☑ Member of the U.S. House of Representatives — State: IN District: 4 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Steve Buyer	May 15, 04

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Stephen Earle Buyer

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Diageo Washington, DC	Appearance	March 12, 2003	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Stephen Earle Buyer

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Money Market Account, Charles Schwab, Indianapolis, In	$50,001-$100,000	Interest	$5,001-$15,000	NA
JT	Savings Account, Wells Fargo, Monticello, Indiana	$1,001-$15,000	Interest	$1-$200	NA
	IRA, Charles Schwab, Indianapolis, IN	$1,001-$15,000	Interest	$5,001-$15,000	NA
SP	IRA, Charles Schwab, Indianapolis, IN	$100,001 - $250,000	Interest	$5,001 - $15,000	NA
	Savings Account, Wright Patman Congressional Federal Credit Union, Washington, DC	$1,001 - $15,000	Interest	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Stephen Earle Buyer

	Checking Account, Wright Patman Congressional Federal Credit Union, Washington, DC	$1,001 - $15,000	NA	NONE	NA
JT	Checking Account, Wells Fargo, Monticello, IN	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	Law Office, 103 West Broadway, Monticello, IN	$100,001 - $250,000	Rent	$5,001 - $15,000	NA
JT	Dell Computer, Comon Stock	$50,001 - $100,000	NA	NONE	Since 2000

SCHEDULE V - LIABILITIES

Name Stephen Earle Buyer

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Wells Fargo Mortgage, Monticello, IN	Mortgage on Law Office, 103 West Broadway, Monticello, Indiana	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Stephen Earle Buyer

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Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
NBC-Today Show	March 2-3	Indianapolis-LaGuardia-Washington, DC	Y	N	N	NA

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

2003 MAY 17 AM 11:31

(Office Use Only)

Stephen Earle Buyer
(Full Name)

2230 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-5037
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: IN District: 4	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	☐ Termination	Termination Date:

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Stephen Earle Buyer

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Money Market Account, Charles Schwab, Indianapolis, In	$50,001-$100,000	Interest	$5,001-$15,000	NA
JT	Savings Account, Wells Fargo, Monticello, Indiana	$1,001-$15,000	Interest	$1-$200	NA
	IRA, Charles Schwab, Indianapolis, IN	$1,001-$15,000	Interest	$5,001-$15,000	NA
SP	IRA, Charles Schwab, Indianapolis, IN	$100,001 - $250,000	Interest	$5,001 - $15,000	NA
	Savings Account, Wright Patman Congressional Federal Credit Union, Washington, DC	$1,001 - $15,000	Interest	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Stephen Earle Buyer

	Checking Account, Wright Patman Congressional Federal Credit Union, Washington, DC	$1,001 - $15,000	NA	NONE	NA
JT	Checking Account, Wells Fargo, Monticello, IN	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	Law Office, 103 West Broadway, Monticello, IN	$100,001 - $250,000	Rent	$5,001 - $15,000	NA
JT	Dell Computer, Comon Stock	$50,001 - $100,000	NA	NONE	Since 2000

SCHEDULE V - LIABILITIES

Name Stephen Earle Buyer

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Wells Fargo Mortgage, Monticello, IN	Mortgage on Law Office, 103 West Broadway, Monticello, Indiana	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Stephen Earle Buyer

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
NBC-Today Show	March 2-3	Indianapolis-LaGuardia-Washington, DC	Y	N	N	NA

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE OFFICE
MC 2004 MAY 14 PM 1:10
(Office Use Only)

Kenneth Stanton Calvert
(Full Name)

2201 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202/225-1986
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives State: CA District: 44 ☐ Officer Or Employee Employing Office:

Termination Date:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Kenneth S. Calvert	5/12/04

600

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kenneth Stanton Calvert

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Commercial Rental 63 W. Grand, Corona, CA	$250,001 - $500,000	RENT	$15,001 - $50,000	
Vacant Land Green Farms, TX	$250,001 - $500,000		NONE	
Stock Calvert Real Properties, Inc.	$250,001 - $500,000	DIVIDENDS	$50,001 - $100,000	
Commercial Rental 322 Washburn - 37.5%	$250,001 - $500,000	RENT	$15,001 - $50,000	
Citizens Business Bank Personal Checking	$15,001 - $50,000	INTEREST	$201 - $1,000	
Magnolia Apts. Riverside, CA (50%)	$100,001 - $250,000	RENT	$15,001 - $50,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Kenneth Stanton Calvert

	624 E. Grand Blvd. Corona, CA (50%)	$250,001 - $500,000	RENT	$15,001 - $50,000	
	Vacant Land Blaine Street Corona, CA (33%)	$50,001 - $100,000	NONE	NONE	S
	817 Kalpali Circle, #205 Carlsbad, CA	$250,001 - $500,000	RENT	$15,001 - $50,000	S
	408,410 S. Main Street Corona, CA	$50,001 - $100,000	RENT	$15,001 - $50,000	
	1154 E. 6th Street Corona, CA (16.5%)	$100,001 - $250,000	RENT	$5,001 - $15,000	P/E

SCHEDULE IV - TRANSACTIONS

Name Kenneth Stanton Calvert

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Vacant Land Blaine Street Corona, CA (33%)	S	10-31-03	$50,001 - $100,000
	817 Kalpali Circle, #205 Carlsbad, CA	S	8-11-03	$500,001 - $1,000,000
	1154 E. 6th Street Corona, CA (16.5%)	P	5-14-03	$250,001 - $500,000

SCHEDULE V - LIABILITIES

Name Kenneth Stanton Calvert

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Citizens Business Bank Corona, CA	Mortgage 63 W. Grand, Corona, CA	$100,001 - $250,000
	Washington Mutual Riverside, CA	Mortgage Magnolia Apts.	$100,001 - $250,000
	Citizens Business Bank Corona, CA	Mortgage Blaine Street (Vacant Lot)	$15,001 - $50,000
	Wells Fargo Bank Los Angeles, CA	Mortgage Kalpati Circle Carlsbad, CA	$100,001 - $250,000
	Al and Opal Wilson Corona, CA	Mortgage 408,410 S. Main Street Corona, CA	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Kenneth Stanton Calvert

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Metropolitan Water District	Apr. 14-16	San Fran. - Los Angeles - Ontario	Y	Y	N	n/a
Urban Water Institute	Aug. 21-22	Corona - San Diego-Corona	Y	Y	N	n/a
Jacobs Engineering	Aug. 28-29	Ontario-Oakland-Ontario	Y	Y	N	n/a
Public Governance Institute	Dec. 5-7	Corona-Rancho Mirage-Corona	Y	Y	N	n/a

05/25/2004 17:09 FAX 002

COMMITTEE ON RESOURCES
CHAIRMAN
SUBCOMMITTEE ON WATER AND POWER
COMMITTEE ON ARMED SERVICES
SUBCOMMITTEES
PROJECTION FORCES
READINESS
COMMITTEE ON SCIENCE
SUBCOMMITTEE:
SPACE AND AERONAUTICS
http://www.house.gov/kcalvert

FAX

Congress of the United States
House of Representatives

Washington, DC 20515–0544
May 25, 2004

KEN CALVERT
44TH DISTRICT, CALIFORNIA
2201 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-0544
(202) 225-1986
DISTRICT OFFICES:
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SUITE 200
RIVERSIDE, CA 92506
(909) 784-4300
100 AVENIDA PRESIDIO
SUITE A
SAN CLEMENTE, CA 92672
(949) 492-2342

2004 MAY 26 AM 8:57
HOUSE OF REPRESENTATIVES

MC

Mr. Jeff Trandahl
C/O Legislative Resource Center
B -106, Cannon House Office Building
Washington, D.C. 20515

Dear Mr. Trandahl:

In reviewing my recent financial disclosure for 2003, I recognize a number of inadvertent errors for which I will hope this letter will correct.

On Page 3 of 6, Schedule III:

Vacant Land, Blaine Street, Block C, type of income is fine with "None"; but Block D, Amount of Income, should read: $50,001 - $100,000. Everything else on this asset is correct;

On the asset below, 817 Kalpali Circle, #205, Block C, type of income should read "None"; Amount of Income should read $100,001 - $1,000,000. Block E, is fine.

On page 4 of 6, Schedule IV:

On Asset, 1154 E. 6th Street, the Amount of Transaction should read "$100,001-$250,000".

Thank you for your immediate attention to these corrections and I apologize for any confusion this may have caused.

Sincerely,

Ken Calvert

KEN CALVERT, M.C.

PRINTED ON RECYCLED PAPER

COMMITTEE ON RESOURCES
CHAIRMAN
SUBCOMMITTEE ON WATER AND POWER
COMMITTEE ON ARMED SERVICES
SUBCOMMITTEES
PROJECTION FORCES
READINESS
COMMITTEE ON SCIENCE
SUBCOMMITTEE
SPACE AND AERONAUTICS
http://www.house.gov/calvert

Congress of the United States
House of Representatives

Washington, DC 20515–0544

May 25, 2004

KEN CALVERT
44TH DISTRICT, CALIFORNIA
2201 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–0544
(202) 225–1986
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RIVERSIDE, CA 92506
(909) 784-4300
100 AVENIDA PRESIDIO
SUITE A
SAN CLEMENTE, CA 92672
(949) 498-7343

LEGISLATIVE RESOURCE CENTER
2004 MAY 27 AM 10: 49
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL

MC

Mr. Jeff Trandahl
C/O Legislative Resource Center
B -106, Cannon House Office Building
Washington, D.C. 20515

Dear Mr. Trandahl:

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On page 4 of 6, Schedule IV:

On Asset, 1154 E. 6th Street, the Amount of Transaction should read "$100,001-$250,000".

Thank you for your immediate attention to these corrections and I apologize for any confusion this may have caused.

Sincerely,

Ken Calvert

KEN CALVERT, M.C.

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(2)

HAND DELIVERED

2004 JUN -9 AM 11:18

MC

(Office Use Only)

(21)

DAVID LEE CAMP
(Full Name)

137 CANNON HOB
(Mailing Address)

(202) 225-3561
Daytime Telephone

WASHINGTON DC

Filer Status	[X] Member of the U.S. House of Representatives — State: MI District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David Lee Camp	6/9/04

608

Name	DAVID LEE CAMP	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source		Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	N/A
NONE			

For payments to charity in lieu of honoraria, use Schedule II

Name	DAVID LEE CAMP	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NONE			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		None; A; $1,001 - $15,000; B; $15,001 - $50,000; C; $50,001 - $100,000; D; $100,001 - $250,000; E; $250,001 - $500,000; F; $500,001 - $1,000,000; G; $1,000,001 - $5,000,000; H; $5,000,001 - $25,000,000; I; $25,000,001 - $50,000,000; J; Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None; A; $1,001 - $2,500; B; $2,501 - $5,000; C; $5,001 - $15,000; D; $15,001 - $50,000; E; $50,001 - $100,000; F; $100,001 - $1,000,000; G; Over $1,000,000	P; S; E
SP, DC, JT — Examples: SP: Mega Corp. Stock		X	X		P
Examples: Simon & Schuster		Indefinite	Royalties		
Examples: 1st Bank of Paducah, KY accounts			X		
Abbott Laboratories-Stock		X	X		
Agilent Technologies-Stock		X	X	X	S
Alcoa-Stock		X	X	X	P
Amsouth Bancorp-Stock		X	X	X	P
American Express-Stock		X	X		P
Amgen-Stock		X	X	X	

For additional assets and unearned income, use next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DAVID LEE CAMP

Page 2 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1-$1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L $50,000,001 - $100,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	ROYALTIES	EXCEPTED TRUST	COVERED DEFERRED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1-$200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Apache Corp-Stock													X																		P
	Applied Materials-Stock													X							X												P
	Automatic Data Pro.-Stock					X								X									X									P
	Avon Products-Stock													X							X											P
	Bank Of America-Stock													X										X								
	Boston Scientific Corp-Stock			X										X							X											P
	Cardinal Health Inc-Stock			X										X																		
	Chemical Financial-Stock					X								X											X							S
	Caterpillar Inc-Stock													X									X									PS
	Cisco Systems-Stock					X								X							X											PS
	Colgate-Palmolive Co-Stock			X										X																		
	Coca Cola Co-Stock			X										X																		PS
	Comerica Inc-Stock						X							X											X							S
	Costco Wholesale-Stock			X										X							X											PS
	Dell Inc-Stock			X										X							X											PS
	Disney Co-Stock													X									X									PS
	Dow Chemical-Stock								X					X													X					S
	Ecolab Inc-Stock			X										X							X											P
	Exxon Mobil Corp-Stock													X									X									P
	Fedex Corp-Stock			X										X																		PS
	Ford Motor Co-Stock													X																		P
	General Dynamics-Stock													X									X									PS

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name DAVID LEE CAMP

Page 3 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	General Electric Co-Stock					X								X																		P
	Gentex Corp-Stock													X									X									
	Gillette Co-Stock					X								X																		P
	HSBC Holdings PLC-Stock													X									X									P
	H J Heinz Co-Stock													X																		
	Hershey Foods-Stock			X										X																		P
	Hewlett-Packard Co-Stock													X									X									
	Home Depot Inc-Stock					X								X									X									
	Honeywell Intl-Stock													X									X									P
	IBM-Stock													X																		P
	Intel-Stock													X									X									P
	Johnson & Johnson-Stock													X									X									P
	Kellogg Co-Stock			X										X									X									P
	Kennametal Inc-Stock			X										X							X											P
	Lear Corp-Stock			X										X							X											P
	Lockheed Martin Corp-Stock			X										X																		P
	McGraw Hill-Stock			X										X									X									P
	Medtronic Inc-Stock													X									X									P S
	Microsoft Corp-Stock													X																		P S
	Oshkosh Truck Corp-Stock			X										X																		P
	Pepsico Inc-Stock			X										X							X											P
	Pfizer Inc-Stock													X																		P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DAVID LEE CAMP

Page 5 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1-$1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	ROYALTIES	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1-$200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Centennial Tax Exempt TR			X										X																		
	SSGA MMF			X										X									X									
	SSGA Tax Free MMF													X																		
	Coca Cola Co-Bonds															X																PS
	Emerson Electric-Bonds					X										X					X											P
	Birmingham, MI-Bonds					X										X																
	Huron Valley, MI-Bonds					X										X									X							
	Georgia ST GO-Bonds															X					X											
	Clarkston MI GO-Bonds															X																
	Michigan ST Trunk-Bonds															X																
	Van Kampen Muni Opport TI-Bonds													X																		
	Chemical Bank - Ckg			X												X																
	AGEdwards - IRA																															
	Centennial - MMF			X										X																		
	American High Income TR-BD													X									X									P
	BD FD of America - Bond													X																		S
	Inter. BD FD of Americas-BD													X									X									P
	Bank of America-Stock			X										X									X									
	Chemical Financial-Stock													X									X									
	H.J. Heinz-Stock			X										X									X									P
	Seligman Common St FD CLA			X										X																		
	Seligman CMMNCTNS-Stock													X							X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DAVID LEE CAMP

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1-$1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1-$200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	AGEdwards - IRA																															
	Seligman Growth FD													X							X											
	Keil Trust-U/A 3/05/98													X		X		X									X					
	FBO N.L. Camp, Grantor,																															
	Robert Keil "Excepted Trust"																															
	Dow Chemical 401(K)													X																		
	MI State Empl. Def Comp													X							X											
	EI DuPont-Stock	X												X									X									PS
	Ford 6.5% Pfd Conv Bond	X														X							X									PS
	Weyerhaeusser Co.-Stock	X												X									X									S
	MI State Envirn-Bond	X														X																S
	Pennsylvania ST GO-Bond	X														X									X							S
	Utica MI GO Schs-Bond	X														X																S
	US Treasury Bills-Bond	X														X																PS

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name DAVID LEE CAMP

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,001 – $15,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Praxair Inc-Stock			X										X																		P
	Procter & Gamble Co-Stock													X									X									P
	Sara Lee Corp-Stock													X									X									
	Schering-Plough Corp-Stock			X										X																		
	Schlumberger LTD-Stock													X							X											P
	Sprint Corp (FON GR)-Stock			X										X									X									S
	Sprint Corp (FCS GR)-Stock			X										X							X											S
	St Jude Medical-Stock													X							X											P
	Starbucks Corp-Stock			X										X							X											P
	Teva Pharm Ind ADR-Stock			X										X																		P
	Texas Instruments-Stock				X									X																		PS
	Time Warner Inc - Stock			X										X							X											PS
	United Technologies-Stock			X										X							X											P
	Verizon Corp-Stock				X									X							X											P
	Walmart Stores, Inc-Stock			X										X																		P
	Wells Fargo & Co. New-Stock			X										X									X									PS
	Whole Foods Inc-Stock			X										X							X											PS
	Wyeth-Stock					X								X																		
	Williams-Sonoma Inc-Stock				X									X							X											P
	Zimmer Holdings Inc-Stock			X										X							X											P
	3M Co-Stock				X									X									X									P
	Centennial Money MKT TR													X									X									

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	3M Co - Common Stock				Various		X								
	Agilent Technologies - Common Stock		X		6-10-03										
	Express Scripts, Inc. - Common Stock		X		6-10-03		X								
	Alcoa Inc - Common Stock				Various										
	AmSouth Bancorp - Common Stock				Various										
	Amer Int'l Group - Common Stock				Various										
	American Express Co - Common Stock				Various										
	Amgen - Common Stock				Various		X								
	Apache Corp - Common Stock				Various										
	Applied Materials Inc - Common Stock				Various										
	AstraZeneca Plc - Common Stock				Various										
	Automatic Data Proc - Common Stock				Various										
	Avon Products - Common Stock				Various										
	Boston Scientific Corp - Stock				Various										
	Coca-Cola Co Inc - Bond				11-10-03										
	Caterpillar IMc - Common Stock				Various										

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SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,000-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	Cisco Systems Inc - Common Stock				Various										
	Coca Cola Co - Common Stock				Various										
	Comcast Corp CL A - Common Stock				Various										
	Costco Wholesale - Common Stock				Various										
	Dell Inc - Common Stock				7-16-03										
	E.I. DuPont - Common Stock				Various										
	EMC Corp - Common Stock				Various										
	Emerson Electric - Bond				11-05-03										
	Ecolab Inc - Common Stock				Various										
	Emmis Comm Cl A - Common Stock				Various										
	Exxon Mobil Corp - Common Stock				Various										
	Fedex Corporation - Common Stock				Various										
	Ford 6.5% Pfd Conv - Bond				Various										
	Ford Motor Company - Common Stock				Various										
	Georgia St GO Ult SerC - Bond				12-04-03		X								
	General Dynamics - Common Stock				Various										

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001-$15,000	Amount of Transaction: C $15,001-$50,000	Amount of Transaction: D $50,001-$100,000	Amount of Transaction: E $100,001-$250,000	Amount of Transaction: F $250,001-$500,000	Amount of Transaction: G $500,001-$1,000,000	Amount of Transaction: H $1,000,001-$5,000,000	Amount of Transaction: I $5,000,001-$25,000,000	Amount of Transaction: J $25,000,001-$50,000,000	Amount of Transaction: K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	General Electric Co - Common Stock				Various										
	Gillette Co - Common Stock				Various										
	GlaxoSmithKline ADR - Common STock				Various										
	Guidant Corp - Common Stock				Various										
	HSBC Holdings PLC - Common Stock				Various										
	Hershey Foods Corp - Common Stock				Various										
	Honeywell Int'l - Common Stock				Various										
	IBM - Common Stock				Various										
	Intel Corp - Common Stock				Various										
	Jacobs Engineering - Common Stock				Various										
	Johnson & Johnson - Common Stock				Various										
	Kellogg Company - Common Stock				Various										
	Kennametal Inc - Common Stock				12-8-03										
	Lear Corporation - Common Stock				Various										
	Lockheed Martin Corp - Common Stock				Various										
	McGraw-Hill - Common Stock				Various										

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.		Type of Transaction		Date	Amount of Transaction									
		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H1 $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP, DC, JT	Asset													
SP	*Example:* Mega Corporation Common Stock				10–12–03		X							
	Medtronic Inc - Common Stock				Various									
	Microsoft Corp - Common Stock				Various									
	New York Times CL A - Common Stock				Various									
	Nucor Inc - Common Stock				Various									
	Oshkosh Truck Corp - Common Stock				Various									
	Pepsico Inc - Common Stock				Various									
	Pfizer Inc - Common Stock				Various									
	Praxair Inc - Common Stock				Various									
	Procter & Gamble Co - Common Stock				Various									
	Schlumberger Ltd - Common Stock				Various									
	Scripps Co Cl A - Common Stock				Various									
	St Jude Medical - Common Stock				Various									
	Starbucks Corp - Common Stock				Various									
	State Street Corp - Common Stock				Various									
	Sunoco Inc - Common Stock				Various									
	Teva Pharm Ind ADR - Common Stock				Various									

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,000–$15,000	Amount of Transaction: C $15,001–$50,000	Amount of Transaction: D $50,001–$100,000	Amount of Transaction: E $100,001–$250,000	Amount of Transaction: F $250,001–$500,000	Amount of Transaction: G $500,001–$1,000,000	Amount of Transaction: H $1,000,001–$5,000,000	Amount of Transaction: I $5,000,001–$25,000,000	Amount of Transaction: J $25,000,001–$50,000,000	Amount of Transaction: K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	Texas Instruments - Common Stock				Various										
	Time Warner Inc - Common Stock				Various										
	U.S. Treas Bill - Bond				4-10-03										
	United Technologies - Common Stock				Various										
	Verizon Comm - Common Stock				Various		X								
	Wal Mart Stores Inc - Stock				Various										
	Walgreen Co - Common Stock				Various										
	Walt Disney Co - Common Stock				Various										
	Wells Fargo & Co - Common Stock				Various										
	Weyerhaeuser Co - Common Stock				Various										
	Whole Foods Inc - Common Stock				Various										
	Williams-Sonoma Inc - Common Stock				Various										
	Zimmer Holdings Inc - Common Stock				Various										
	AT&T Wireless Svcs - Common Stock		X		Various										
	Advent Software - Common Stock		X		Various										
	Amer Int'l Group - Common Stock		X		Various										

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO./DAY/YR)	Amount of Transaction: A $1,000-$15,000	Amount of Transaction: C $15,001-$50,000	Amount of Transaction: D $50,001-$100,000	Amount of Transaction: E $100,001-$250,000	Amount of Transaction: F $250,001-$500,000	Amount of Transaction: G $500,001-$1,000,000	Amount of Transaction: H1 $1,000,001-$5,000,000	Amount of Transaction: I $5,000,001-$25,000,000	Amount of Transaction: J $25,000,001-$50,000,000	Amount of Transaction: K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	AstraZeneca Plc - Common Stock		X		Various										
	Coca-Cola Co Inc - Common Stock		X		Various										
	Caterpillar Inc - Common Stock		X		Various										
	Cisco Systems Inc - Common Stock		X		Various										
	Coca Cola Co - Bond		X		12-23-03		X								
	Comcast Corp CL A - Common Stock		X		Various										
	ConocoPhillips - Common Stock		X		Various										
	Costco Wholesale - Common Stock		X		Various										
	Dell Inc - Common Stock		X		1-27-03										
	Diebold - Common Stock		X		1-29-03										
	E.I. DuPont - Common Stock		X		Various		X								
	EMC Corp - Common Stock		X		Various										
	Emmis Comm CL A - Common Stock		X		Various										
	Fedex Corporation - Common Stock		X		Various										
	Ford 6.5% Pfd Conv - Bond		X		Various		X								
	General Dynamics - Common Stock		X		Various										

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
	GlaxoSmithKline ADR - Common Stock		X		Various		X								
	Guidant Corp - Common Stock		X		Various										
	Jabil Circuit Inc - Common Stock		X		Various										
	Jacobs Engineering - Common Stock		X		Various										
	Michigan St GO Ult Environ - Bond		X		11-01-03		X								
	Medtronic Inc - Common Stock		X		10-17-03										
	Merck & Co - Common Stock		X		Various										
	Microsoft Corp - Common Stock		X		Various										
	New York Times CL A - Common Stock		X		Various										
	Nucor Inc - Common Stock		X		Various										
	Pennsylvania ST GO ULT First - Bond		X		11-12-03										
	Scripps Co CL A - Common Stock		X		Varimus										
	State Street Corp - Common Stock		X		Various										
	Sunoco Inc - Common Stock		X		Various										
	Texas Instruments - Common Stock		X		Various										
	Time Warner Inc - Common Stock		X		Various										

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,000-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	U.S. Treas Bill - Bond		X		Various				X						
	Utica MI GO ULT Cmnty Schs - Bond		X		11-13-03		X								
	Walgreen Co - Common Stock		X		Various										
	Walt Disney Co - Common Stock		X		Various										
	Wells Fargo & Co - Common Stock		X		Various		X								
	Weyerhaeuser Co - Common Stock		X		Various		X								
	Whole Foods Inc - Common Stock		X		Various										
	Wrigley (WM) Jr Co - Common Stock		X		Various										
	Sprint Corp (Fon Group) - Common Stock		X		6-10-03		X								
	Sprint (PCS Group) - Common Stock		X		6-10-03										
	Comerica Inc - Common Stock		X		11-13-03										
	Del Monte Foods Co - Common Stock		X		4-21-03										
	Dow Chemical Company - Common Stock		X		11-13-03										
	IRA AGEdwards -														
	American High Income Trust				4-21-03		X								
	Interm. BD FD of Amer				4-21-03		X								

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SCHEDULE IV — TRANSACTIONS

Name DAVID LEE CAMP

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-03		X								
	Seligman Common ST FD-CLA				4-21-03										
	Bond FD of Amer		X		4-21-03		X								
	Seligman Global Fund		X		4-21-03										
	Chemical Financial - Common Stock		X		11-13-03										

This page may be copied if more space is required.

Name DAVID LEE CAMP | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Ripon Education Fund	Aug. 10-15	Detroit-London-Detroit	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
NONE		

GPO: 2004 91-910 (mac)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:21
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

Christopher B. Cannon
(Full Name)

118 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202-225-7751
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: UT District: 03	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☑ No ☐
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/17/04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Christopher B. Cannon

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Wells Fargo Bank Checking-Salt Lake City	$1,001 - $15,000	INTEREST	NONE	
JT	Zion's First National Bank Checking-Salt Lake City	$1,001 - $15,000		NONE	
JT	Salomon Smith Barney CMA-Salt Lake City	$1,001 - $15,000	INTEREST	NONE	
	David Cannon Loan Rec-Salt Lake City	$100,001 - $250,000	INTEREST	NONE	
	Gary Ruse Loan Rec-Gordon, NE	$50,001 - $100,000	INTEREST	NONE	
	Cannon Industries, Inc. Loan Rec-Provo, UT	$1,000,001 - $5,000,000	INTEREST	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Christopher B. Cannon

	Joe Cannon Loan Rec-Provo, Ut	$250,001 - $500,000	INTEREST	NONE	
	Advanced Resin Systems Stock-Des Plaines, IL	$1,000,001 - $5,000,000	DIVIDENDS	$100,001 - $1,000,000	
	Automated Comm. Group/Brookline Salt Lake City, UT	$100,001 - $250,000		NONE	
	Cannon Industries, Inc. Stock-Provo, UT	$100,001 - $250,000		NONE	
	Sundance Lot Sundance, UT	$100,001 - $250,000		NONE	
	Farm/Heavy Equipment Mapleton, UT	$15,001 - $50,000		NONE	
	Terrace Falls Condo Salt Lake City, UT	$250,001 - $500,000		NONE	
	Kyzen Corporation Stock-Nashville,TN	$15,001 - $50,000		NONE	S
	Kyzen Corporation Stock Options-Nashville,TN	None		NONE	

SCHEDULE IV - TRANSACTIONS

Name Christopher B. Cannon

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Kyzen Corp Class A stock held in Smith Barney acct	S	4/23/03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Christopher B. Cannon

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	National City Mortgage Orem, Utah	Note payable on Terrace Falls Condo	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Christopher B. Cannon

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Center For The New American Century	June 19-20	Wash., D.C.--Denver	Y	Y	N	N/A
American Immigration Lawyer Association	June 20-21	Denver--New Orleans--Salt Lake City	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Christopher B. Cannon

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
National Advisory Board Member	CAMIE (Character and Morality in Entertainment)
Advisory Committee	Scouting Legal Defense Fund
Board of Directors Member	Friends of Lake Powell, Inc.
Honorary Board of Advisors Member	Lead America Foundation

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U.S. HOUSE OF REPRESENTATIV

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

Eric Ivan Cantor
(Full Name)

6004 Oxbury Court Glen Allen, VA 23059
(Mailing Address)

202-225-2815
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: VA District: 7	☐ Officer Or Employee — Employing Office:	**A $200 penalty shall be assessed against anyone who files more than 30 days late.**
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief		5/14/04

SCHEDULE I - EARNED INCOME

Name Eric Ivan Cantor

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Virginia College Savings Plan	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Allied Cap Corp New stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Alltel Corporation stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Amgen Inc stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Apartment Invt & Mgmt Co Pref 8%	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	API Treasuries Trust (formerly Richmond Resources 401(k) API Treasuries Trust)	$1,001 - $15,000	INTEREST	$1 - $200	
	API Trust Growth Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Eric Ivan Cantor

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
CAP-12	Speech	October 8, 2003	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Archer Daniels Midland Company stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	AT&T Capital Corp Sr Pines 8.125%Preferred Stock	None	INTEREST	$2,501 - $5,000	S
	AT&T Capital Corp Sr Pines 8.25% Preferred Stock	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	AT&T Corp Com New stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	AT&T Wireless Svcs Inc stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Bank of America accounts Richmond, VA	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
	BB&T bank accounts Richmond, VA	$1,001 - $15,000	INTEREST	$1 - $200	
	Boeing Company stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Broward County FL Water and Sewer Utility Revenue Bond	None	INTEREST	$1,001 - $2,500	S
	Cantor & Cantor Note Receivable, Richmond, VA/Law Firm	$50,001 - $100,000	INTEREST	NONE	
	Capital Guardian Emerging Markets Equity Fund	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Capital Re Corporation LLC	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Carlton Communications 8.00% (England) stock	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	P
	CBTCS for CIT 7.75% Pref Stock	$15,001 - $50,000	INTEREST	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	CBTCS Ser 2002-8 for Bell South 7% Pref Stock	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	CBTS Ser 2002-1 for Ber 8.125% due 12/15/2045 Pref stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	Centerpoint Energy Inc stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Chubb Corporation stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Citizens Communications Company stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Clay County FL Housing Finance Authority Revenue Bond	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
	CLM Acceptance Co. stock, Richmond, VA/Account Factoring	$1,001 - $15,000	Sub S Income	$1,001 - $2,500	
	CLM Capital Co. stock, Richmond, VA/Account Factoring	$50,001 - $100,000	Sub S Income	$15,001 - $50,000	
	CLM Financial Co. stock, Richmond, VA/Account Factoring	$1,001 - $15,000	Sub S Income	$1,001 - $2,500	
	Colonial High Income Mun Tr Sh Ben Int Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Comcast Corporation New Class A stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Congregation Or Atid Bond	$1 - $1,000	INTEREST	NONE	
	Consolidated Edison Inc. stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Consumers Energy Company Financing III Pref Stock	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
	Corporate Backed Tr CTFS 03-10 7% due 11/15/2023 Pref stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Corporate Backed Tr Ctfs Ser 01-35 8% Corning Pfd Stk	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Dade County FL Aviation Revenue Bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Disney Walt Comp Common Stk	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dominion Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dreyfus Premier Florida Municipal Bond Fund Class A M/F	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	DuPont E.I. De Nemours & Co. stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Federal National Mortgage Association Series 93-021 Class KA	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Federal National Mortgage Association Series 94-036 Class Q	None	INTEREST	$201 - $1,000	S
	First Eagle Global Fund	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	
	Fleming Companies Inc. stock	$1 - $1,000	DIVIDENDS	$1 - $200	
	Franklin Federal Tax Free Income Fund Class A M/F	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Franklin Florida Tax Free Income Fund Class A M/F	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	General Motors Corp. stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	GlaxoSmithKline PLC Sponsored ADR (United Kingdom)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Goldman Sachs Group stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Goldman Sachs Core Fixed Income Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Goldman Sachs CORE Small Cap Equity Fund	$1,001 - $15,000	INTEREST	$2,501 - $5,000	
	Goldman Sachs CORE U.S. Equity Fund	$1,001 - $15,000	INTEREST	$2,501 - $5,000	
	Goldman Sachs High Yield Fund	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Goldman Sachs International Equity Fund	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Goldman Sachs Large Cap Value Fund	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Goldman Sachs Mid Cap Value Fund	$15,001 - $50,000	INTEREST	$5,001 - $15,000	
	Goldman Sachs Real Estate Securities Fund	$1,001 - $15,000	INTEREST	$2,501 - $5,000	
	Goldman Sachs Short Duration Gov't Fund	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Goldman Sachs Stable Value Fund	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Granite Broadcasting Corporation stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Heritage Cash Trust Money Market Account	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Hillsborough County FL Aviation Authority Revenue Bond	None	INTEREST	$201 - $1,000	S
	Hughes Electronics Corp stock (formerly General Motors Corp Class H New stock)	$1,001 - $15,000	DIVIDENDS	NONE	E
	IDT Corporation Class B stock	$15,001 - $50,000	DIVIDENDS	NONE	
	Indian Trail Groves, L.P.	$1,001 - $15,000	INTEREST	$1 - $200	
	Janus Capital Mgt Concentrated Growth Fund	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Jefferson Pilot Corporation stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Kanawha County WV Residential Mortgage Revenue Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	La Quinta Corp Paired CTF Reit	$1,001 - $15,000	DIVIDENDS	NONE	P
	Lee County FL Capital and Transportation Facilities Revenue Bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Liberty Media Corp New Com Ser A stock	$15,001 - $50,000	DIVIDENDS	NONE	
	Lord Abbott Global Income Fund Class A M/F	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Magic Lantern Group Inc NY stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Markel Corporation stock	$15,001 - $50,000	DIVIDENDS	NONE	P
	Medarex Inc. stock	$1,001 - $15,000	DIVIDENDS	NONE	
	MFS Charter Income Tr Sh Ben Int Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Morgan Stanley Emer Mkts Fd	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	MSIF Trust Fixed Inc Portfolio	$1,001 - $15,000	INTEREST	$201 - $1,000	
	New York State Electric & Gas First Mortgage Bond	None	INTEREST	$201 - $1,000	S
	Newmont Mining Corp stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	News Corporation Ltd ADR New (Australia) stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	North Fork Bancorporation NY stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Omega Advisors, Inc. Multi-Market Hedge Fund	$1,001 - $15,000	INTEREST	$2,501 - $5,000	
	Orange County FL Health Facilities Auth Rev, Hosp Rev Bonds, Mand Sink Fund begins 11/01/2015	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Orange County FL Health Facilities Authority Revenue Bond, mand sink fund begins 11/15/2021	$50,001 - $100,000	INTEREST	$2,501 - $5,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Enc Ivan Cantor

	OXY Capital Trust I TOPRS 8.16% Pref Stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Pacificorp Capital I Quips 8.25% Pref Stock	None	INTEREST	$201 - $1,000	S
	Pennsylvania RL Est Invt Tr REIT (formerly Crown Amerm Rlty Tr Sh Ben Int Reit)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Pequot Capital Management Inc. US Equity Hedge Fund	$1,001 - $15,000	INTEREST	$1 - $200	
	PFD Plus Trust First Amerm Financl 7.55% due 4/1/2028 Pref stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Pfizer Inc stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Philadelphia PA Authority for Industrial Development Airport Revenue Bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Phoenix Goodwin Multi-Sector Fixed Income Fund Class A M/F	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	PIMCO Global Bond Fund II (formerly Goldman Sachs Global Income Fund)	$1,001 - $15,000	INTEREST	$1 - $200	
	Plum Creek Timber Company Inc REIT	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	PPLUS 7.65% for ElPaso Pref Plus Trust Pref Stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Qualcomm Inc. stock	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
	REI Trust I TOPRS7.2% Pref Stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Reliant Res Inc. stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Richmond Resources Ltd. Note Receivable, Richmond, VA/Real Estate Development	$100,001 - $250,000	INTEREST	NONE	
	Rio Tinto PLC Sponsored ADR (United Kingdom)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Royal Bank of Scotland PLC Ser J Non Cum Pref Stk (UK)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Royal Dutch Petroleum Company NY stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Russell 1000 Growth Index Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Russell 1000 Value Index Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Salomon Bros High Inc Fund II	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	San Juan Basin Rty Tr Unit Ben Int	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	Sara Lee Corp stock	None	DIVIDENDS	$201 - $1,000	S
	Schlumberger Limited stock (Netherlands Antilles)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Seagram Joseph E & Sons Inc Quids 8% Pref Stock	None	INTEREST	$1,001 - $2,500	S
	Sears Roebuck Acceptance Corp. Notes	None	INTEREST	$1,001 - $2,500	S
	SLM Corporation stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	SSgA S&P 500 Index Fund	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Stone Street Fund 1990, L.P.	$1,001 - $15,000	INTEREST	$1 - $200	
	Suntrust Banks Inc stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	T. Rowe Price Foreign Equity Fund	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Tampa Electric Comp First Mortgage Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Target Corporation stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	TCW Cowen Asset Management Small Cap Equity Fund	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	TDS Capital I Toprs 8.5% Pref Stock	None	INTEREST	$1,001 - $2,500	S
	Telephone & Data Systems Inc NT Ser A 7.6% Pfd Stk	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Telephone & Data Systems Inc. stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Tennessee Valley Authority Parrs A2029 Series A 6.5% Pref Stock	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
	Texas Genco Hldgs Inc stock(Centerpoint Energy spin-off)	$1,001 - $15,000	DIVIDENDS	$1 - $200	E
	Transocean Inc Ord (Cayman Islands) stock	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Travelers P&C Capital I Pfd Stock	None	INTEREST	$201 - $1,000	S
	Tredegar Corporation stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Trust CTFS 2001-1 AT&T TRUCS 7.45% Pref Stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	Trust CTFS Ser 2001-27 Royal Carib CBTCS 8 7/8% Pref stock	$1,001 - $15,000	INTEREST	$201 - $1,000	P
	TrustMor Mortgage Co. stock, Richmond, VA/Mortgage Banking	$100,001 - $250,000	Sub S Income	$15,001 - $50,000	
	United Dominion Realty Tr Inc Reit	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Van Kampen Municipal Income Fund Class A M/F	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Verizon Communications stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Viacom Inc Class A stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Virginia Retirement System Small/Mid Cap Equity Index Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Virginia College Savings Plan 529 VEST accounts	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Virginia College Savings Plan 529 VPEP accounts	$15,001 - $50,000	INTEREST	NONE	
	Virginia Credit Union accounts	$100,001 - $250,000	INTEREST	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eric Ivan Cantor

	Virginia Retirement System Active Bond Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$1 - $200	
	Virginia Retirement System Defined Benefit Plan	$15,001 - $50,000	INTEREST	NONE	
	Virginia Retirement System Income & Growth Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
	Virginia Retirement System S&P 500 Index Fund (formerly VRS 457 Plan)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Virginia Retirement System Stable Value Fund (formerly VRS 401a Plan)	$1,001 - $15,000	INTEREST	$1 - $200	
	Wachovia Corp 2nd New stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Water Tower Associates, LLC stock, Richmond, VA/Real Estate Development	$15,001 - $50,000	Partnership Income	$15,001 - $50,000	
	Weyerhauser Company stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Williams Companies Inc Del stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Xerox Corp stock	$1,001 - $15,000	DIVIDENDS	NONE	S
	Yorkshire Capital Trust I Tr Secs 8.08% Pfd Stk	None	INTEREST	$201 - $1,000	S

SCHEDULE IV - TRANSACTIONS

Name Eric Ivan Cantor

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	OXY Capital Trust I TOPRS 8.16% Pref Stock	P	1-24-03	$1,001 - $15,000
	PPLUS 7.65% for ElPaso Pref Plus Trust Pref Stock	P	7-15-03	$1,001 - $15,000
	REI Trust I TOPRS7.2% Pref Stock	P	7-15-03	$1,001 - $15,000
	Trust CTFS 2001-1 AT&T TRUCS 7.45% Pref Stock	P	8-29-03	$1,001 - $15,000
	Apartment Invt & Mgmt Co Pref 8%	P	7-16-03 8-25-03	$15,001 - $50,000
	New York State Electric & Gas First Mortgage Bond	S	4-1-03	$1,001 - $15,000
	Travelers P&C Capital I Pfd Stock	S	4-9-03	$15,001 - $50,000
	Paxar Corp stock	S	10-14-03	$1,001 - $15,000
	Carlton Communications 8.00% (England) stock	P	6-4-03	$15,001 - $50,000
	CBTS Ser 2002-1 for Ber 8.125% due 12/15/2045 Pref stock	P	4-22-03	$1,001 - $15,000
	Trust CTFS Ser 2001-27 Royal Canb CBTCS 8 7/8% Pref stock	P	4-22-03 5-1-03	$1,001 - $15,000
	PFD Plus Trust First Amem Financl 7.55% due 4/1/2028 Pref stock	P	4-22-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Eric Ivan Cantor

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependant child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	La Quinta Corp Paired CTF Reit	P	6-16-03	$1,001 - $15,000
	SLM Corporation stock	P	2-18-03	$1,001 - $15,000
	National Semiconductor Corp. stock	S	9-5-03 12-10-03	$1,001 - $15,000
	PRG-Schultz International Inc stock	S	2-7-03	$1,001 - $15,000
	Xerox Corp stock	S	2-7-03	$1,001 - $15,000
	Pfizer Inc stock	P	11-25-03	$1,001 - $15,000
	San Juan Basin Rty Tr Unit Ben Int	P	11-25-03	$1,001 - $15,000
	Corporate Backed Tr CTFS 03-10 7% due 11/15/2023 Pref stock	P	11-25-03	$1,001 - $15,000
	Sears Roebuck Acceptance Corp Notes	S	11-5-03	$15,001 - $50,000
	AT&T Capital Corp Sr Pines 8.25% Preferred Stock	S	12-15-03	$15,001 - $50,000
	Federal National Mortgage Association Series 94-036 Class Q	S	4-25-03	$1,001 - $15,000
	Hillsborough County FL Aviation Authority Revenue Bond	S	10-1-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Eric Ivan Cantor

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Pacificorp Capital I Quips 8.25% Pref Stock	S	8-29-03	$1,001 - $15,000
	Sara Lee Corporation	S	9-5-03	$1,001 - $15,000
	Seagram Joseph E & Sons Inc Quids 8% Pref Stock	S	11-20-03	$15,001 - $50,000
	TDS Capital I Toprs 8.5% Pref Stock	S	9-2-03	$15,001 - $50,000
	AT&T Corp Com New stock	P	1-24-03	$1,001 - $15,000
	Markel Corporation stock	P	4-22-03	$15,001 - $50,000
	Broward County FL Water and Sewer Utility Revenue Bond	S	4-1-03	$15,001 - $50,000
	Yorkshire Capital Trust I Tr Secs 8.08% Pfd Stk	S	6-9-03	$15,001 - $50,000
	Texas Genco Hldgs Inc stock(Centerpoint Energy spin-off)	E	1-6-03	$1,001 - $15,000
	Hughes Electronics Corp stock (formerly General Motors Corp Class H New stock)	E	12-24-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Eric Ivan Cantor

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
AIPAC	Jan. 12-13	Richmond-Ft. Lauderdale-Richmond	Y	Y	N	N/A
Congressional Institute	Jan. 29-31	Wash., D.C.-St. Michael's MD-Richmond	Y	Y	N	N/A
Congressional Institute	Feb. 6-9	Wash., DC-White Sulphur Springs-Richmond	Y	Y	N	N/A
The Public Governance Institute	Feb. 28-March 2	Richmond-White Sulphur Springs-Richmond	Y	Y	Y	N/A
Financial Services Roundtable	Apr. 3-4	Wash., DC-Naples, FL-Richmond	Y	N	N	N/A
The Tax Coalition	Apr. 25-26	Richmond-Hot Springs, VA-Richmond	Y	Y	Y	N/A
American Israel Education Foundation	Aug. 23-29	New York-Israel-Richmond	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Eric Ivan Cantor

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Virginia Holocaust Museum
Director (unpaid)	CLM Capital Inc.
Director (unpaid)	Water Tower Associates

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

15

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 5:07
(Office Use Only) CLERK
U.S. HOUSE OF REPRESENTATIVES

Shelley Moore Capito
(Full Name)

2 Comstock Place Charleston, WV 25314
(Mailing Address)

202-225-2711
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: WV District: 02	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Shelley Moore Capito	5/13/04

SCHEDULE I - EARNED INCOME

Name Shelley Moore Capito

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Smith Barney	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	401(k)-Citicorp Stock Fund	$100,001 - $250,000	DIVIDENDS	N/A	
SP	401(k)-Smith Barney Aggressive Growth Fund	$100,001 - $250,000	DIVIDENDS/CAPITAL GAINS	N/A	
SP	401(k)-Smith Barney Euro Pacific (formerly International) Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	N/A	E
SP	401(k)-Smith Barney Large Cap Value Fund	$100,001 - $250,000	DIVIDENDS/CAPITAL GAINS	N/A	E
SP	401(k)-Templeton Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	N/A	P
SP	Alliance Petroleum	$1,001 - $15,000	ROYALTIES	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

SP	Banc One Corp	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	BB&T Corp	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	BB&T Corp	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Bristol Myers Squibb Co.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Charleston WV Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
DC	Chevron	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Cisco Systems	$1,001 - $15,000	DIVIDENDS	NONE	
	Cisco Systems	$1,001 - $15,000	DIVIDENDS	NONE	
SP	Citigroup Employee Fund of Funds, L.P.	$1,001 - $15,000	DIV/INT/CAPITAL GAINS	$1 - $200	P
SP	Citigroup Inc.	$1,000,001 - $5,000,000	DIVIDENDS/CAPITAL GAINS	$50,001 - $100,000	S
	Citigroup Inc.	$500,001 - $1,000,000	DIVIDENDS	$5,001 - $15,000	
DC	Citigroup Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Citigroup Nonqual Options	$15,001 - $50,000	N/A	NONE	E
SP	Citigroup Option Call	$15,001 - $50,000	CAPITAL GAINS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

SP	Coca-Cola Co.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Duke Energy	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
	Edgewood Country Club	$1,001 - $15,000	N/A	NONE	
DC	Europacific Growth Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
SP	Exxon Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	General Electric Co.	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	General Motors Corp.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Home Depot	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Huntington Bancshares Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Huntington Bancshares Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	IBM Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Income Fund of America	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
SP	Intel Corp	$15,001 - $50,000	DIVIDENDS	$1 - $200	
DC	Intel Corp	$1 - $1,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

SP	Investment Co Of America	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
DC	Investment Co. Of America	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
SP	IRA-Amgen Inc.	$1,001 - $15,000	DIVIDENDS	NONE	
SP	IRA-Bank One	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	IRA-Coca Cola Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	IRA-Gillette Co.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IRA-Middleburg Fin. Corp	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	IRA-Pfizer Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IRA-Smith Barney Large Cap Value Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	
SP	IRA-Smith Barney Money Fund Retirement Portfolio	$1 - $1,000	DIVIDENDS	$1 - $200	
	IRA-Smith Barney Money Funds	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	IRA-Time-Warner	$1 - $1,000	DIVIDENDS	NONE	
SP	IRA-Tyco Intl.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	IRA-United Parcel Service Inc.	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

SP	IRA-Worldcom, Inc.	$1 - $1,000	DIVIDENDS	NONE	
	Jefferson County WV Industrial Development Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Merck	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Microsoft	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Middleburg Fin. Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	New Perspective Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
SP	Norfolk Southern Corp.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Pfizer	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Proctor & Gamble Co.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	R-H Capital Partners, L.P.	$15,001 - $50,000	INTEREST/CAPITAL GAINS	$1 - $200	
SP	Royal Dutch Petroleum Co.	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Smith Barney Money Funds	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Smith Barney Money Funds	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Smith Barney Pension	$100,001 - $250,000	DIVIDENDS/INTEREST	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

SP	SSB Capital Partners I, L.P.	$1,001 - $15,000	INTEREST/CAPITAL GAINS	$1 - $200	P
SP	Time-Warner	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Travelers Property Casualty Class A	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Travelers Property Casualty Class A	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Travelers Property Casualty Class B	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	Travelers Property Casualty Class B	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Tri-Star Resources	$1,001 - $15,000	DIVIDENDS	NONE	
SP	TRV Employees Fund, L.P.	$1,001 - $15,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$201 - $1,000	
	Verizon Communications Inc.	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Vista Resources	$1,001 - $15,000	ROYALTIES	$1,001 - $2,500	
	Walt Disney Co.	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Walt Disney Co.	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
DC	Washington Mutual Fund	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	WV General Obligation State Road Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Shelley Moore Capito

	WV Public Employees Retirement System	$1,001 - $15,000	INTEREST	N/A	
SP	WV State Infrastructure General Obligation Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	WV Water Development Authority Revenue Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	WV Water Development Authority Revenue Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Shelley Moore Capito

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Duke Energy	P	06-10-03	$1,001 - $15,000
	Duke Energy	S	12-31-03	$1,001 - $15,000
SP	Microsoft	P	10-09-03	$1,001 - $15,000
SP	Pfizer	P	10-09-03	$1,001 - $15,000
SP	Walt Disney	S	12-31-03	$1,001 - $15,000
SP	Merck	S	12-31-03	$1,001 - $15,000
SP	Time-Warner	S	12-31-03	$1,001 - $15,000
SP	SSB Capital Partners I, LP	P	04-21-03	$1,001 - $15,000
SP	SSB Capital Partners I, LP	P	10-13-03	$1,001 - $15,000
SP	Citigroup Employee Fund of Funds	P	06-24-03	$1,001 - $15,000
SP	Citigroup	S	01-14-03	$15,001 - $50,000
SP	Citigroup	S	03-14-03	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name Shelley Moore Capito

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Citigroup	S	03-18-03	$15,001 - $50,000
SP	Citigroup	S	04-04-03	$15,001 - $50,000
SP	Citigroup	S	04-15-03	$15,001 - $50,000
SP	Citigroup	S	05-30-03	$15,001 - $50,000
SP	Citigroup	S	07-07-03	$15,001 - $50,000
SP	Citigroup	S	09-26-03	$15,001 - $50,000
SP	Citigroup	S	10-03-03	$15,001 - $50,000
SP	Citigroup Nonqualified Options-8 times on various dates	E	various	$15,001 - $50,000
SP	Smith Barney Euro Pacific	E	11/24/03	$15,001 - $50,000
SP	Smith Barney Large Cap Value Fund	E	11/24/03	$15,001 - $50,000
SP	401(k)-Templeton Fund	P	11/24/03	$15,001 - $50,000
SP	Income Fund of America	P	01/24/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Shelley Moore Capito

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Investment Co of America	P	01/24/03	$1,001 - $15,000
SP	New Perspective Fund	P	01/24/03	$1,001 - $15,000
	IRA-Middleburg Fin. Corp.	P	10/28/03	$1,001 - $15,000
SP	WV State Univ & College Bond--reported as sold in 2000 but inadvertantly carried forward	n/a	n/a	n/a

SCHEDULE V - LIABILITIES

Name Shelley Moore Capito

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
SP	Smith Barney	Margin loan	$100,001 - $250,000
DC	Smith Barney	Margin loan	$10,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Shelley Moore Capito

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Citigroup	May 2-3	Charleston-White Sulpher Springs-Charleston	Y	Y	Y	N/A
US Chamber of Commerce	June 29-30	Charleston-White Sulpher Springs-Charleston	Y	Y	N	N/A
Public Governance Institute	Feb 28-Mar 2	Charleston-White Sulpher Springs-Charleston	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Shelley Moore Capito

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Kanawha Scholars Fund-The Greater Kanawha Valley Foundation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 12 PM 12:04
CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Lois G. Capps
(Full Name)

1216 State Street, Suite 403
(Mailing Address)

Santa Barbara, CA 93101

Daytime Telephone: (805) 730-1710

Filer Status	[XX] Member of the U.S. House of Representatives	State: California District: 23	[ ] Officer or Employee — Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [XX]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [XX]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [XX]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [XX]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lois Capps	5.13.04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Taylor & Francis Publishers		$204
	Harper Collins Publishers		93
	Augsburg Fortress Publishers		63
	Publisher House of ELCA		470

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the Instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	Block C: DIVIDENDS	INTEREST	EXCEPTED TRUST	QUALIFIED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X							X																P
	Examples: Simon & Schuster		Indefinite														Royalties				X					X			
	Examples: 1st Bank of Paducah, KY accounts													X									X						
	B&D Money Market			X									X																
	Capital World Growth				X								X																
	Dodge & Cox Balanced												X																
	T Rowe Price Small Cap												X																
	Eaton Vance Tax Mang.												X																
	Tax Exempt Fund of CA			X									X																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lois G. Capps

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,000 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	ROYALTIES	EXCEPTED TRUST	BUSINESS	Other Type of income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	VanKampen Equity & Inc													X								X										
	Citibank NA			X												X						X										
	Amgen (IRA)			X										X							X											
	Centurytel (IRA)			X										X								X										
	Church & Dwight (IRA)			X										X									X									
	Hewlett Packard (IRA)			X										X									X									
	Lowes (IRA)			X										X									X									
	Maytag (IRA)			X										X									X									
	Medtronic (IRA)			X										X									X									
	Nokia (IRA)			X										X									X									
	Pitney Bowes (IRA)			X										X									X									
	Sun Microsystems (IRA)			X										X									X									
	Target (IRA)			X										X									X									
	US Bancorp (IRA)			X										X									X									
	Washington Mutual (IRA)			X										X									X									
	Worldcom (IRA)			X										X									X									
	Xerox (IRA)			X										X									X									
	Congressional Credit			X												X							X									
	Midstate Bank				X											X								X								
	Fidelity Magellan					X								X										X								
	Midstate Bancshares			X										X										X								
	Metlife Trust		X											X																		

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lois G. Capps

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	NONE	Other Type of Income (Specify)	BLOCK D Amount of Income: i None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	ING Direct			X					X						X				

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SCHEDULE IV — TRANSACTIONS

Name Lois G. Capps

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10–12–03		X								
	Putnam Money Market	X	12-01-03	X									
	Putnam Tax Smart Equity	X	12-02-03			X							
	Putnam Research Class A	X	12-01-03		X								
	Putnam CA Tax Exempt	X	12-02-03	X									
	George Putnam Class A	X	12-01-03			X							
	Putnam Growth & Income	X	12-01-03		X								
	Putnam Global Equity	X	12-02-03		X								
	Tax Exempt Fund of California		12-19-03	X									
	Capital World Growth & Income		12-19-03		X								
	Dodge & Cox Balanced Fund		12-30-03		X								
	Eaton Vance Tax Mang. Growth		12-19-03		X								
	T Rowe Price SMall Cap Stock		12-19-03		X								
	Van Kampen Equity & Income Fund		12-19-03		X								
	Putnam International Growth	X	12-02-03		X								
	FNMA (IRA)	X	12-03-03	X									
	McKesson Corp (IRA)	X	12-03-03	X									

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SCHEDULE IV — TRANSACTIONS

Name Lois G. Capps

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10-12-03	X								
	Centurytel (IRA)		01-17-03									
	Maytag (IRA)		06-06-03									
	Pitney Bowes (IRA)		01-17-03									
	US Bancorp (IRA)		01-16-03									
	Washington Mutual (IRA)		12-03-03									
	Target (IRA)	X	12-03-03									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Faith & Politics Institute	Jan 10-12	Santa Barbara	Y	Y	Y	N
Public Governance Institute	Feb 28-Mar 2	Wash.,DC-Greenbrier-Wash.,DC	Y	Y	N	N
UCLA School of Nursing	Jun 13-14	Santa Barbara, CA-LosAngeles-SantaBarbara	Y	Y	N	N
Faith & Politics Institute	Sept12-13	Wash.,DC-Potomac,MD-Wash.,DC	Y	Y	N	N
Swiss Foundation For World Affairs	Nov 30-Dec 2	Des Moines, IA-Geneva, Switzerland-SantaBarb	Y	Y	N	N
Public Governance Institute	Dec 5-7	Santa Barbara,CA-Palm Springs,CA-Wash.,DC	Y	Y	N	N

Additional pages may be added if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
(9) LEGISLATIVE RESOURCE CENTER
2004 MAY 11 PM 4:04
MC
U.S. HOUSE OF REPRESENTATIVES

Michael Everett Capuano
(Full Name)

172 Central St.
Somerville, MA 02145
(Mailing Address)

1202-225-5111 OR
Daytime Telephone:
617-621-6208

Filer Status	[X] Member of the U.S. House of Representatives — State: MA District: 8th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Michael E. Capuano	5-10-04

Name Michael E. Capuano | Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Yoshida, Crayle + Sokolski, PC Burlington, MA	Spouse salary	N/A
	Brown + Brown CPA, Boston, MA.	Spouse salary	N/A
	CT+M, LLC, Somerville, MA	Spouse salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NOT APPLICABLE			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B	Block C													Block D											Block E
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X								X																	P
			Simon & Schuster		Indefinite																Royalties								X			
			1st Bank of Paducah, KY accounts					X									X									X						
JT	172 Central St, Somerville, MA									X						X					Res. rented 27% rented						X					
JT	Hidden Valley, Tuftonboro, NH							X								X					Res. rented - 2nd home - practically							X				
JT	East Cambr. Sav. Bk, Somerville MA				X												X				Money Mkt + chkg		X									
JT	Som School Emp FCU Somerville MA						X										X				Savings Acct				X							
	National Deferral Plan				X																Deferred Comp	X										
	Congress Fed CU - DC				X												X				chkg + sav. acct		X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael F. Capuano

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Retirement Alliance 401K			X							401K									
SP	Fidelity – Trad. IRA		X								IRA									
SP	CT + M, LLC - Somerville		X								Prem Ucc									
DC	Winterhill Bank Sm MA		X								Certif Dep									
DC	Northwest Mutual Fund		X								Life Ins.									
DC	Pax World	X									Mutual Fund			X						

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SCHEDULE IV — TRANSACTIONS

Name Michael E. Capuano | Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
DC	PAX WORLD		X		11-14-03	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	Bank of America, Getville, NY	Mtg on Tuftonboro, NH Prop			X		
JT	Winter Hill BK, Somerville, MA	Mtg on Central St, Som MA		X			
SP	Winter Hill BK, Som. MA	Mtg on CTMT – ½ Liable Joint + Severable			X		

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	NONE	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NONE						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	None

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

Use additional sheets if more space is required.

HAND DELIVERED

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Benjamin L. Cardin
(Full Name)

9 Whitebridge Court Baltimore, MD 21208
(Mailing Address)

202-225-4016
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representative — State: MD District: 3	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Benjamin L. Cardin	5/11/04

SCHEDULE I - EARNED INCOME

Name Benjamin L. Cardin

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Maryland	Legislative Pension	$4,534

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Benjamin L. Cardin

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Panther Club, 203 Old Crossing Rd., Balto., Md.	Speech	Oct. 19, 2003	$100

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Benjamin L. Cardin

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $6,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Olin Corp. Common Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
Note 1	Time Warner Inc. New Common Stock	$1,001 - $15,000		NONE	
	The News Corp. Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	National Grid Transco Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Comcast Corp. Class A Common Stock	$1,001 - $15,000		NONE	
	United Bankshares, Inc. Common Stock	$1,001 - $15,000		NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Benjamin L. Cardin

JT	Smith Barney Cash Management Account	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Northeast Utilities Common Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	A.T.& T. Wireless Common Stock	$1,001 - $15,000		NONE	
	A.T.& T. Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Lucent Technology Common Stock	$1,001 - $15,000		NONE	
JT	Israel Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	PS
JT	Meyer M. Cardin Trust - Note 2	$250,001 - $500,000	INTEREST	$15,001 - $50,000	PS
	same	same	DIVIDENDS	$1 - $200	
	Venture BG Partnership c/o Howard S. Brown; Balto., Md. - Note 3	$100,001 - $250,000	Partnership Income	$2,501 - $5,000	
	same	same	Cash Distributions	$5,001 - $15,000	
	Keough - ABA Retirement Plan - Benjamin L. Cardin Retirement Plan - Note 4	$500,001 - $1,000,000	N/A	NONE	
SP	Deferred Compensation Plan - Note 5	$50,001 - $100,000	N/A	NONE	
SP	TIAA Cref Retirement Plan - Note 6	$1,001 - $15,000	N/A	NONE	
Note 7	IRAs - Morgan Stanley Account includes following assets:	below	below	below	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Benjamin L. Cardin

	1. Israel Bonds	$50,001 - $100,000	INTEREST	$1,001 - $2,500	PS
	2. Money Market Account	$1,001 - $15,000	INTEREST	$1 - $200	
	Congressional Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
	Benjamin L. Cardin Trust - Note 8	$15,001 - $50,000	DIVIDENDS	$1 - $200	S
	same	same	INTEREST	$1 - $200	
	Union Pacific Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Arch Chemical Common Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Gillette Co., Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Amerigas Partners, LP	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Met Life Co., Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Minnesota Life Variable Life Insurance - Note 9	$15,001 - $50,000	N/A	NONE	E
	NCR Common Stock	$1 - $1,000		NONE	
SP	Maryland College Investment Plan - Note 10	$15,001 - $50,000	N/A	NONE	P
JT	Morgan Stanley Account including following assets:	below	below	below	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Beniamin L. Cardin

JT	1. Global Dividend Growth Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
JT	2. Columbia Utility Fund A - Note 11	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	3. Putnam Global Growth Fund A	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	4. AIM Value Fund A	$15,001 - $50,000		NONE	
JT	5. Constellation Energy Common Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	6. Mid Atlantic Realty Trust	None	CAPITAL GAINS	$2,501 - $5,000	S
JT	same	same	DIVIDENDS	$1 - $200	
JT	7. Pfizer Common Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	8. Cash Mangement Account	$1,001 - $15,000	INTEREST	$1 - $200	
	Morgan Stanley Account including following assets:	below	below	below	
	1. Zimmer Holding Inc. Common Stock	$15,001 - $50,000		NONE	
	2. Washington Suburban Bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	S
	3. Howard Co., Md. Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	4. Bristol Myers Squibb Common Stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Benjamin L. Cardin

	5. Anne Arundel Co., Md. Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	6. Seligman Bond Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	7. Maryland State Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
	8. Smith Barney Intermediate Bond Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	9. Eaton Vance Muncipal Trust	$15,001 - $50,000	INTEREST	$1,001 - $2,500	P
	same	same	DIVIDENDS	$1 - $200	
	same	same	CAPITAL GAINS	$1 - $200	
	10. Maryland Tax Free Bond Trust 84	$1,001 - $15,000	INTEREST	$1,001 - $2,500	S
	11. Nuveen Maryland Fremium Muncipal Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	12. Delaware Group Dividend and Income Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	13. Putnam Funds for Growth and Income A & B	None	DIVIDENDS	$201 - $1,000	S
	14. Cash Management Account	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	15. Columbia Utilities Fund A - Note 11	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	16. Morgan Stanley Select Municipal Fund	None	CAPITAL GAINS	$1,001 - $2,500	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Benjamin L. Cardin

	same	same	INTEREST	$201 - $1,000	
	17. Morgan Stanley American Opportunity Fund	$50,001 - $100,000		NONE	
	18. Maryland Health & Higher Eduaction Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	19. Washington Metro Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
	20. Capital Opportunity Trust B	$1,001 - $15,000		NONE	
	21. American Europacific Growth C	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	22. Calamos Growth & Income C	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	P

SCHEDULE IV - TRANSACTIONS

Name Benjamin L. Cardin

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	United Bankshares, Inc. Common Stock	P	12-29-03	$1,001 - $15,000
JT	Israel Bonds	PS	P 4-1-03 & 11-1-03; S 4-15-03	$1,001 - $15,000
JT	For transactions Meyer M. Cardin Trust see Note 2	PS	see Note 2	see Note 2
	Israel Bonds - IRAs	PS	P - 12-29-03; S 12-1-03	$15,001 - $50,000
	For transactions Benjamin L. Cardin Trust see Note 8	S	see Note 8	see Note 8
	Minnesota Life Variable Life Insurance - Note 9	E	11-12-03	$15,001 - $50,000
SP	Maryland College Investment Plan - Note 10	P	12-22-03	$1,001 - $15,000
JT	Mid Atlantic Realty Trust	S	10-2-03	$1,001 - $15,000
	Washington Suburban Bond	S	4-1-03	$1,001 - $15,000
	Eaton Vance Muncipal Trust	P	Monthly see Note 12	$1,001 - $15,000
	Maryland Tax Free Bond Trust 84	S	Return of Principal 3-15-03 & 9-15-03	$15,001 - $50,000
	Putnam Funds for Growth and Income A & B	S	10-31-03	$100,001 - $250,000

SCHEDULE IV - TRANSACTIONS

Name Benjamin L. Cardin

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Morgan Stanley Select Municipal Fund	S	11-26-03	$1,001 - $15,000
	American Europacific Growth C	P	11-5-03	$15,001 - $50,000
	Calamos Growth & Income C	P	11-5-03	$50,001 - $100,000

SCHEDULE V - LIABILITIES

Name Benjamin L. Cardin

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	For Liabilities of Venture BG Partnership see Note 3	see Note 3	see Note 3

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Benjamin L. Cardin

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Commonwealth Fund & John F. Kennedy School Harvard University	Jan. 16-19, 2003	Aventura, Fla. (no reimbursement for travel to and from Fla.)	Y	Y	Y	N/A
Aspen Institute	Feb. 14-18, 2003	Baltimore, Md to Montego Bay, Jamaica to Baltimore, Md	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Benjamin L. Cardin

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Menorah Lodge #771; B'nai B'rith; Baltimore, Maryland
Board of Visitors	University of Maryland Law School; Baltimore, Maryland
Technical Advisory Board (inactive)	Maryland Psychiatric Research Center; Baltimore, Maryland
Board of Advisors	Baltimore Zionist District; Baltimore, Maryland
Member	President's Advisory Board; University of Maryland, Baltimore County
Advisory Committee	Lawyer's Campaign Against Hunger; Baltimore, Maryland
Partner	Partnerships listed in Schedule III - Venture BG Partnership
Board of Trustees	Baltimore Council on Foreign Affairs; Baltimore, Maryland
Trustee	Irrevocable Trust created by Roger Lipitz and family c/o Piper Rudnick Attorneys; Baltimore, Maryland
Trustee	Irrevocable Trust created by Lawrence M. Katz c/o Piper Rudnick Attorneys; Baltimore, Maryland
Trustee	Irrevocable Trust created by Herbert Rosen; Baltimore, Maryland
Trustee	Goucher College; Towson, Maryland

SCHEDULE VIII - POSITIONS

Name Benjamin L. Cardin

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Executive Committee	Israel Bonds of Maryland
Advisory Board	The Center for Democracy and the Interpretation of Civil Society; St. Mary's College; St. Mary's City, Maryland
Trustee	Baltimore City Historical Society; Baltimore, Maryland
Advisory Board	Johns Hopkins Institute for Public Studies; Baltimore, Maryland

SCHEDULE IX - AGREEMENTS

Name Benjamin L. Cardin

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-2-87 (retired)	Filer and the State of Maryland	As a "retiree" from State service, I receive pension benefits (reported in Schedule I) and the right to participate in health insurance with the employer subsidizing part of the cost.

FOOTNOTES

Name Benjamin L. Cardin

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	277 shares in name of filer and 136 shares held jointly; company changed name from AOL Time Warner 10-16-03	Time Warner Inc. New Common Stock

FOOTNOTES

Number	Section / Schedule	Footnote	This note refers to the following item
2	Schedule III and IV	A trust established by filer's father for the benefit of filer and spouse during their lifetime with remainderman interest to filer's children. The Trust held the following reportable Assets and had the following reportable Transactions in 2003: (1) Federal Home Loan Note, Value of Asset, $1001 - $15,000; Income - Interest $201 - $1000; Transaction S Return of Principal, monthly $1001 - $15,000; (2) Fannie Mae Note, Value of Asset, None; Income - Interest $201 - $1000 and Capital Gains $2501 - $5000 ; Transaction S Return of Principal (monthly) and Maturity (8/25/03) $1001 - $15,000; (3) Prince George's Co., Md. Bonds, Value of Asset $50,001 - $100,000; Income - Interest $1001 - $2500; (4) Baltimore, Md. Bonds, Value of Asset $15,001 - $50,000; Income - Interest $201 - $1000; (5) Baltimore Co., Md. Bonds, Value of Asset $15,001 - $50,000; Income - Interest $2501 - $5000, Capital Gains $201 - $1000; Transaction S Bonds Called 4/1/03 and 8/1/03 $15,001 - $50,000; (6) Maryland Health & Higher Education Bonds, Value of Asset $50,001 - $100,000; Income - Interest $2501 - $5000; (7) Maryland Stadium Bond, Value of Asset $1001 - $15,000; Income - Interest $201 - $1000; (8) Howard Co., Maryland Bond, Value of Asset $15,001 - $50,000; Income - Interest $201 - $1000; (9) Washington Metro Area Transit Bond, Value of Asset $15,001 - $50,000; Income - Interest $1001 - $2500; (10) Maryland State Bonds, Value of Asset $15,001 - $50,000; Income - Interest $1001 - $2500; (11) Maryland State Local Facilities Bond, Value of Asset $15,001 - $50,000; Income - Interest $201 - $1000; (12) Washington Co., Maryland Bond, Value of Asset $1001 - $15,000; Income - Interest $201 - $1000; (13) Maryland State Industrial Bond, Value of Asset, none; Income - Interest $201 - $1000; Transaction S bond called 12/15/03 $15,001 - $50,000; (14) Baltimore, Maryland Wastewater Bond, Value of Asset $15,001 - $50,000; Income - Interest $1001 - $2500; (15) University of Maryland Bond, Value of Asset $15,001 - $50,000; Income - Interest $201 - $1000; (16) Maryland State Community Developement Bonds, Value of Asset $15,001 - $50,000;	Meyer M. Cardin Trust - Note 2

FOOTNOTES

Number	Section / Schedule	Footnote	This note refers to the following item
		Income - Interest $201 - $1000; Transaction P purchase 12/16/03 $15,001 - $50,000; (17) Montgomery Co., Maryland Bond, Value of Asset $15,001 - $50,000; Income - Interest $1001 - $2500; (18) General Electric Corp. Bond, Value of Asset $1001 - $15,000; Income - Interest $201 - $1000; Transaction P purchased 5/30/03 $1001 - $15,000; (19) St. Mary's Co., Maryland Bond, Value of Asset $15,001 - $50,000; Income - Interest, none; Transaction P purchased 8/7/03 $1001 - $15,000; and (20) Money Market Fund, Value of Asset $1001 - $15,000; Income - Interest $1 - $200; Transaction P/S cash management account for investments listed above.	
3	Schedule III and V	Venture BG is a partnership that holds the land at 3601 Washington Blvd., Baltimore, Maryland. The filer owns a 1.01 percent interest. The evaluation in based on the adjusted capital account. The Asset of the partnership is as follows: 3601 Washington Blvd., Baltimore, Maryland, Value of Asset $5,000,001 - $25,000,000; Income - Rent $500,001 - $1,000,000. The Liabilities of the Partnership are as follows: (1) GMAC Commercial Mortgage, Horsham, Pa., mortgage on 3601 Washington Blvd., Baltimore, Maryland, Amount of Liability $1,000,001 - $5,000,000 and (2) Howard Brown, Baltimore, Maryland, loan, Amount of Liability $250,001 - $500,000.	Venture BG Partnership
4	Schedule III	Retirement funds invested in Stable Asset Return Fund, International Bond Fund, Large-Cap Growth Equity Fund and Moderate Portfolio Fund	Keough - ABA Retirement Plan - Benjamin L. Cardin
5	Schedule III	Invested through Lincoln Finance Group and invested in Fixed Account, Bond Fund, Growth & Income Fund and Special Opportunity Fund	Deferred Compensation Plan
6	Schedule III	Invested in TIAA Traditional Fund and CREF Stock Fund	TIAA Cref Retirement Plan
7	Schedule III	Includes IRAs for filer and spouse	IRAs

FOOTNOTES

Name Benjamin L. Cardin

Number	Section / Schedule	Footnote	This note refers to the following item
8	Schedule III & IV	A Trust established by filer on June 29, 1990 for the benefit of spouse during her lifetime with remainderman interest to filer's children. The Trust held the following reportable Assets and Transactions in 2003: (1) Primissory Note from B. Green & Co., Inc., Baltimore, Maryland, Value of Asset, none; Income - Interest $1001 - $2500; Capital Gain $15,001 - $50,000; Transaction S note paid off 2/4/03 $15,001 - $50,000 and (2) Morgan Stanley Cash Management Account, Value of Asset $15,001 - $50,000; Income - Dividend $1 - $200. In addition the Trust purchased life insurance in March, 1991.	Benjamin L. Cardin Trust
9	Schedule III & IV	Value represents cash value as of 11/12/03 (most recent information supplied by insurance company). Listed as Asset because cash value directed into equity accounts as of 11/12/03. Invested in following funds: Guaranteed Principal Account, Franklin Large Cap Growth Security, Fidelity VIP Equity-Income, Advantus Index 400 Mid-Cap, MFS New Discovery Series, Oppenheimer International Growth, W & R Target International, Templeton Developing Markets Security, Advantus Real Estate Security, Advantus Bond, and Oppenheimer High Income	Minnesota Life Variable Life Insurance
10	Schedule III & IV	Set up for benefit of granddaughters. Invested in portfolios 2018 and 2021.	Maryland College Investment Plan
11	Schedule III	Name change from Liberty Utility Fund A 10/13/03	Columbia Utility Fund A
12	Schedule IV	Purchases made automatically through dividend and/or distribution reinvestment program with company	Eaton Vance Muncipal Trust

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FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

Dennis Cardoza
(Full Name)

503 Cannon House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-6131
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: CA District: 18	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/17/04

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SCHEDULE I - EARNED INCOME

Name Dennis Cardoza

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Merced Faculty Associates	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Dennis Cardoza

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Cardoza & Cardoza Landholding Partnership Atwater, CA (see below) 9.38 acres at Bellvue & Redwood Atwater, CA	$500,001 - $1,000,000		NONE	
Deed of Trust Redwood Ave. Atwater, CA	[redacted] $ 0	Note Payment	[redacted] $100,001 - $1,000,000	S
County Bank of Merced Stock (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
Bank of America (Checking and Savings Accounts)	$100,001 - $250,000	INTEREST	$1,001 - $2,500	

SCHEDULE IV - TRANSACTIONS

Name Dennis Cardoza

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Deed of Trust Redwood Ave. Atwater, CA	S	05-20-03	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name Dennis Cardoza

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Deutsche Financial Los Angeles, CA	Loan on Boat (Paid off in 2003)	$50,001 - $100,000
	United Mileage Plus Visa	Credit Card (Paid off in 2003)	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Dennis Cardoza

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Business Roundtable Congress and the Economy Program	May 1-2	Wash., D.C.--New York City--San Francisco	Y	Y	N	N/A
Klamath Alliance for Resources & Environment Education Mission	June 20-22	Wash., D.C.--McCloud, CA--Wash., D.C.	Y	Y	Y	N/A
American Israel Education Foundation Education Mission	Aug. 2-10	San Francisco--New York--Israel	Y	Y	N	N/A
The Annenberg Foundation Trust CA Delegation Retreat	Dec. 5-7	Fresno--Palm Springs--Fresno	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Dennis Cardoza

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Cardoza & Cardoza

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(6)

2004 MAY 14 AM 9:38

MC

(Office Use Only)

Brad Rogers Carson
(Full Name)

317 Cannon Building Washington D.C. 20515
(Mailing Address)

202 225-2701
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State: District:	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☒	No ☐
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		

Name Brad Carson	Page __ of __

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
Carl Albert State College, 1507 S. McKenna, Poteau, OK	Speech	02/09/04	$ 500

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Name BrAD Carson | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None	DIVIDENDS	I None	P, S, E
		B $1,001 - $15,000	INTEREST	II $201 - $1,000	
		C $15,001 - $50,000	EXCEPTED TRUST	III $1,001 - $2,500	
		D $50,001 - $100,000	EXCEPTED REAL ESTATE	IV $2,501 - $5,000	
		E $100,001 - $250,000	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	V $5,001 - $15,000	
		F $250,001 - $500,000		VI $15,001 - $50,000	
		G $500,001 - $1,000,000		VII $50,001 - $100,000	
		H1 $1,000,001 - $5,000,000		VIII $100,001 - $1,000,000	
		I $5,000,001 - $25,000,000		IX $1,000,001 - $5,000,000	
		J $25,000,001 - $50,000,000		X Over $5,000,000	
		K Over $50,000,000			
SP, DC, JT	*Examples:* SP Mega Corp. Stock		X		P
	Simon & Schuster	Indefinite		Royalties	
	1st Bank of Paducah, KY accounts		X		
JT	RCB Bank, Claremore, OK		X		
	Crowe & Dunlevy (401k)			X	
S	Vanguard 500 Index Funds		X	X	
S	Bank of Oklahoma IRA CD's	X	X	X	

For additional assets and unearned income, use next page.

Name	Brad Carson	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
National Indian Gaming Assn. Washington, DC	Indian Blanket	$800

Use additional sheets if more space is required.

Name Brad Carson | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Aspen Institute	05/26/03 06/01/03	Ft.Smith-DFW-Rome Rome-Chicago-Tulsa	Y	Y	Y	N
	The Aspen Institute	01/03/04 01/11/04	Tulsa-DFW-Honolulu Honolulu-DFW-Tulsa	Y	Y	Y	N

Name	Brad Carson	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
01/01/99	Crowe & Dunleavy, Tulsa, OK	Maintenance of 401 (k)

GPO: 2004 91-910 (mec)

Use additional sheets if more space is required.

BRAD CARSON
2ND DISTRICT, OKLAHOMA

317 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-3602
(202) 225-2701
FAX (202) 225-3038

www.carson.house.gov

COMMITTEES
TRANSPORTATION AND INFRASTRUCTURE

RESOURCES

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Congress of the United States
House of Representatives

May 20, 2004

HAND DELIVERED

Clerk of the House
B-106 Cannon Building
Washington, D. C. 20515

MC

To Whom It May Concern:

This is to notify your office that when filing my Financial Disclosure Statement for the year 2003, I inadvertently included on Schedule II, Payments in Lieu of Honoraria Made to Charity a payment to Carl Albert State College in the amount of $500.00 was for 2004 and Schedule VI-Gifts, the blanket valued at $800 was April 5, 2004. These items should not have been reported in 2003.

I would greatly appreciate your noting this in my records. Should you have questions, please call Cathie McCarley at 202-225-2701. Thank you very much.

Very truly yours,

Brad Carson
Member of Congress

BC:chm

CLAREMORE:
403 WEST 1ST STREET, SUITE 100
CLAREMORE, OK 74017-7801
(918) 341-9336
FAX: (918) 341-9437

MUSKOGEE:
215 STATE STREET, SUITE 815
MUSKOGEE, OK 74401-6657
(918) 687-2533
FAX: (918) 687-2532

MCALESTER:
321 SOUTH 3RD, SUITE 4
MCALESTER, OK 74501-5410
(918) 423-5951
FAX: (918) 423-1940

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BRAD CARSON
2ND DISTRICT, OKLAHOMA

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U.S. HOUSE OF REPRESENTATIVES

Congress of the United States
House of Representatives

May 20, 2004

(5)

HAND DELIVERED

MC ✓

Clerk of the House
B-106 Cannon Building
Washington, D. C. 20515

To Whom It May Concern:

This is to notify your office that when filing my Financial Disclosure Statement for the year 2003, I inadvertently included on Schedule VII-Travel Payments and Reimbursements, travel that was made January 5,2004 through January 11, 2004, a trip sponsored by the Aspen Institute to Honolulu. This travel should not have been reported in 2003.

I would greatly appreciate your noting this in my records. Should you have questions, please call Cathie McCarley at 202-225-2701. Thank you very much.

Very truly yours,

Brad Carson
Member of Congress

BC:chm

CLAREMORE:
403 WEST 1ST STREET, SUITE 100
CLAREMORE, OK 74017–7801
(918) 341–9336
FAX: (918) 341–9437

MUSKOGEE:
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FAX: (918) 687–2532

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MCALESTER, OK 74501–5410
(918) 423–5951
FAX: (918) 423–1940

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Name Brad Carson

Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Aspen Institute	05/26/03 06/01/03	Ft. Smith-DFW-Rome Rome-Chicago-Tulsa	Y	Y	Y	N
*	The Aspen Institute	01/05/04 01/11/04	Tulsa-DFW-Honolulu Honolulu-DFW-Tulsa	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
(9) 2004 MAY 21 AM 10: 15
U.S. HOUSE OF REPRESENTATIVES
MC
(Office Use Only)

Julia M. Carson
(Full Name)

2530 N Park
Indianapolis In 46205
(Mailing Address)

202 225 4011
317 926 7696
(Daytime Telephone)

Filer Status	☒ Member of the U.S. House of Representatives	State: IN District: 7th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Julia Carson	

Name	Page _ of
Julian Carson	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Cummins Engine Co Inc	1,260.00	
	State of Indiana Legislative Retirement	7,332.00	
	State of Indiana, Public Employee Retirement	4,708.50	

For payments to charity in lieu of honoraria, use Schedule II.

Name Julia Carson | Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500

This page may be copied if more space is required.

Name Julie Carson | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A: Asset and/or Income Source	A None	B $1-$1,000	C $1,001-$15,000	D $15,001-$50,000	E $50,001-$100,000	F $100,001-$250,000	G $250,001-$500,000	H $500,001-$1,000,000	I $1,000,001-$5,000,000	J $5,000,001-$25,000,000	K $25,000,001-$50,000,000	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1-$200	III $201-$1,000	IV $1,001-$2,500	V $2,501-$5,000	VI $5,001-$15,000	VII $15,001-$50,000	VIII $50,001-$100,000	IX $100,001-$1,000,000	X $1,000,001-$5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X																			P
	Simon & Schuster																			Royalties													
	1st Bank of Paducah KY accounts						X									X																	
	Keybank Cincinnati			X												X																	
				X												X																	

Examples: SP Mega Corp. Stock; Simon & Schuster; 1st Bank of Paducah KY accounts

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name [illegible] | Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset															BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	[illegible]	C $1,001 – $15,000	[illegible]	E $50,001 – $100,000	[illegible]	G $250,001 – $500,000	[illegible]	I $1,000,001 – $5,000,000	[illegible]	K $25,000,001 – $50,000,000	[illegible]	DIVIDENDS	[illegible]	INTEREST	[illegible]	EXCEPTED TRUST	[illegible]	Other Type of Income (Specify)	I None	[illegible]	III $201 – $1,000	[illegible]	V $2,501 – $5,000	[illegible]	VII $15,001 – $50,000	[illegible]	IX $100,001 – $1,000,000	[illegible]	XI Over $5,000,000	P, S, E

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SCHEDULE IV — TRANSACTIONS

Name Julia Carson | Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								

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Name Julie Carr | Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
		n/a					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	n/a	

Use additional sheets if more space is required.

Name Julia Carson | Page of __

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days

N/A

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Name Julie Carson | Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	n/a

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A — For use by Members, officers, and employees

2003 MAY 13 PM 12:16

(Office Use Only)

JOHN RICE CARTER
(Full Name)

1144 RED BUD LANE ROUND ROCK, TX 78664
(Mailing Address)

703-225-3864
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: TX, District: 31 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief		5/13/04

SCHEDULE I - EARNED INCOME

Name JOHN RICE CARTER

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Texas Judicial Retirement System	Judicial Pension	$77,466.60

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOHN RICE CARTER

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
AXXIOM STOCK	$1 - $1,000	OTHER HELD STOCK	NONE	
EXXON STOCK (DIVIDENDS SUBJJECT TO LIFE ESTATE FOR PAULINE CARTER EXCEPT FOR 8 SHARES)	$1,000,001 - $5,000,000	DIVIDENDS	$1-$200	

SCHEDULE IV - TRANSACTIONS

Name	

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction

SCHEDULE V - LIABILITIES

Name JOHN RICE CARTER

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	UNION STATE BANK OF FLORENCE, TEXAS	BANK LOAN	$50,001 - $100,000
	CITIBANK	BANK CARD	$10,001 - $15,000
	MBNA BANK	BANK CARD	$15,001 - $50,000
	SALLIE MAE (COMB)	STUDENT LOANS	$100,001 - $250,000

SCHEDULE VI - GIFTS

Name

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name JOHN RICE CARTER

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
KOREA-US EXCHANGE COUNCIL	NOV 28-DEC 3	WASHINGTON, DC - SOEUL, SOUTH KOREA - WASHINGTON , DC	Y	Y	Y	NO

SCHEDULE VIII - POSITIONS

Name	

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX - AGREEMENTS

Name	

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(4)

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 3:28
(Office Use Only)

Edward Espenett Case
(Full Name)
128 Cannon House Office Building
(Mailing Address)
Washington, DC 20515
Daytime Telephone 202-225-4906

Filer Status: [x] Member of the U.S. House of Representatives — State: Hawaii District: 2 — [ ] Officer or Employee — Employing Office:

Report Type: [ ] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [x]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [x]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [x]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5/15/04

Name	Edward E. Case	Page 2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	United Airlines	Spouse salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Edward E. Case

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	*Examples* SP Mega Corp Stock; Simon & Schuster; 1st Bank of Paducah, KY accounts	A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAIN; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
	Indefinite	X	X	X	P
	Royalties				
	Carlsmith Ball Profit Sharing Plan	✓	Pension	N/A	
SP	United Airlines 401(k) Ret. Svgs. Plan	✓	401(k)	N/A	
SP	Morgan Stanley IRA Standard Spread	✓	IRA	N/A	
JT	Hawaii State FCU	✓	✓	✓	
JT	United Airlines FCU	✓	✓	✓	
	Carlsmith Ball, Honolulu, HI Capital Note Account	✓	✓	✓	

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Public Governance Institute	2/28-3/2	DC - Warm Springs VA - DC	Y	Y	Y	N
	New Democrat Network	5/16-17	DC - Kingsmill VA - DC	Y	Y	N	N
	American Israel Education Fd.	8/2-10	DC - Israel - DC	Y	Y	Y	N
	Democratic Leadership Council	9/12-14	DC - Mackinac MI - DC	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

22

2003 MAY 17 P 4:16

(Office Use Only)

MC

Michael N. Castle
(Full Name)

2001 Kentmere Place Wilmington, DE 19806
(Mailing Address)

302-428-1902
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives — State: DE — District: 01 ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? — Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? — Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? — Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? — Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? — Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? — Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? — Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? — Yes ☑ No ☐
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? — Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief

Signature of Reporting Individual: Michael N. Castle

Date (Month, Day, Year): 5/17/04

SCHEDULE I - EARNED INCOME

Name Michael N. Castle

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Taylor Made Interiors	Spouse Salary	N/A
State of Delaware	Pension	$18,398.64

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
14 George Street, Dewey Beach, DE (Note: for the above, gross rental only and does not reflect expenses)	$250,001 - $500,000	RENT	$5,001 - $15,000	N/A
224A Justice Court, Washington, DC (Note: for the above, gross rental only and does not reflect expenses)	$50,001 - $100,000	RENT	$5,001 - $15,000	N/A
Ninth Street Partnership, owning offices @ 300-322 W. Ninth Street, Wilmington, DE 16.67% interest (Partnership, Inc.) gross rental income (Note: for the above, gross rentals only and does not reflect expenses	$100,001 - $250,000	RENT	$15,001 - $50,000	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

4566 Parkside Drive Kiawah Island, SC	$250,001 - $500,000	RENT	$5,001 - $15,000	P
Vanguard Money Market Reserve Prime Portfolio	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	PS
Aegis Value Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
Legg, Mason Capital Opportunity Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Buffalo Small Cap Fund	$15,001 - $50,000		NONE	S
Caldwell & Orkin Market Oppor.	$50,001 - $100,000		NONE	S
Dodge & Cox Balanced Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$2,501 - $5,000	P
American Century Target 2015 Fund	$15,001 - $50,000		NONE	S
American Century Target 2010 Fund	$1,001 - $15,000		NONE	S
American Century Target 2025 Fund	$1,001 - $15,000		NONE	S
Artisan Inter. Fund	$15,001 - $50,000		NONE	S
Cohen & Steers Realty	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
FBR Financial Services Fund	$15,001 - $50,000		NONE	S
Janus Overseas Fund	$15,001 - $50,000		NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

Boston Partners Small Cap Value II	$15,001 - $50,000	CAPITAL GAINS	$1 - $200	P
FPA Crescent Inst. Shares	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Heartland Value Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
Marsico Focus Fund	$15,001 - $50,000		NONE	
Oakmark Global Fund	$15,001 - $50,000	CAPITAL GAINS	$1 - $200	P
Weitz Partners Value Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Wm. Blair Small Cap Growth Fund	$15,001 - $50,000	CAPITAL GAINS	$1 - $200	P
Vanguard Inter-Term Tax Exempt Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
Vanguard Capital Value Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Vanguard Health Care Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
Vanguard Tax Managed Growth and Income Fund	$15,001 - $50,000		NONE	S
Evergreen Money Market Fund (successor to Live Oak General Money Market Fund)	$50,001 - $100,000	DIVIDENDS	$1 - $200	P
WYETH (formerly American Home Products Corp.)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
American Power Conversion Corp.	$1,001 - $15,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

BP P.L.C. Sponsored ADR	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
Nortel Networks Corp.	$1,001 - $15,000		NONE	S
Freemarkets Inc.	$1,001 - $15,000		NONE	S
General Motors Corp. CLH	$1,001 - $15,000		NONE	S
Grant Prideco Inc.	$1,001 - $15,000		NONE	
MLM Index Fd Enhanced Ser (A managed future fund)	$15,001 - $50,000		NONE	P
Gemstar TV Guide	$1,001 - $15,000		NONE	
Liberty Media Corp.	$1,001 - $15,000		NONE	S
Weatherford Inter., Inc.	$15,001 - $50,000		NONE	S
Amgen, Inc.	$15,001 - $50,000		NONE	
Sun Microsystems, Inc.	$1,001 - $15,000		NONE	S
DE General Obligation due 5-1-04 2000 Coupon	$1,001 - $15,000	INTEREST	$201 - $1,000	
DE General Obligation due 5-1-03 Zero Coupon	$15,001 - $50,000	INTEREST	$201 - $1,000	S
PR Electric Power due 7-1-17 Zero Coupon	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

	DE State Economic Development Author. Due 5-1-07	$1,001 - $15,000	INTEREST	$201 - $1,000	
	DE EDA Hospital Revenue Riverside Zero Coupon due 1-1-06	$1,001 - $15,000	INTEREST	$201 - $1,000	
	DE General Obligation due 5-1-05 Zero Coupon	$1,001 - $15,000	INTEREST	$201 - $1,000	
	DE General Obligation due 5-1-07 Zero Coupon	$1,001 - $15,000	INTEREST	$1 - $200	P
	Ariba Inc. (IRA)	$1 - $1,000		NONE	
	AOL Time Warner (IRA)	$1,001 - $15,000		NONE	
	BCE Inc. (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Cisco Systems (IRA)	$1,001 - $15,000		NONE	
	EMC Corp. (IRA)	$1,001 - $15,000		NONE	
	Equity Office Prop. (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Flextronics International (IRA)	$1,001 - $15,000		NONE	
	Intel Corp. (IRA)	$15,001 - $50,000	DIVIDENDS	$1 - $200	S (partial)
	Kimco Realty Corp. (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	Nortel Networks (IRA)	$1,001 - $15,000		NONE	S (partial)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

Oracle Corp (IRA)	$15,001 - $50,000		NONE	
Plum Creek Timber (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
Pfizer Inc. (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Valero Energy (IRA)	$15,001 - $50,000		NONE	
Fidelity Floating Rate High Income	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
Ameristock Mutual Fund (IRA)	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
Janus Mid-Cap Value (formerly Berger Mid-Cap Value) (IRA)	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Clipper (IRA)	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
Columbia High Yield (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
Columbia Acorn Select Class Z (formerly Liberty Acorn Twenty Class Z)	$15,001 - $50,000	CAPITAL GAINS	$1 - $200	P
Oakmark International (IRA)	$15,001 - $50,000		NONE	P
Oakmark Equity & Income (IRA)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
PBHG IRA Capital Preservation	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	P
PBHG IRA Capital Preservation (IRA)	$15,001 - $50,000		NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

	Pimco Total Return Class D (IRA)	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	Pimco Emerging Markets Bond (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Royce Low Priced Stock Fund (IRA)	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	P
	Muhlenkamp Fund (IRA)	$15,001 - $50,000		NONE	P
	Fidelity Cash Reserves (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P, S
	Fidelity Cash Reserves (IRA)	$100,001 - $250,000		NONE	S
	Flextronics Intl. Ltd.	$1,001 - $15,000		NONE	
	Cortex Pharmaceuticals	$1,001 - $15,000		NONE	
	Arotech Corp. (formerly Electric Fuel Corp.)	$1 - $1,000		NONE	
SP	Morgan Stanley Liquid Asset Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Morgan Stanley Pacific Growth Fund (IRA)	$1,001 - $15,000		NONE	
SP	Morgan Stanley European Growth Fund (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Morgan Stanley American Oppor. (IRA)	$1,001 - $15,000		NONE	
SP	Morgan Stanley Dividend Growth Securities (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

SP	Alger Mid Cap Growth	$1,001 - $15,000		NONE	
SP	Fidelity Diver Intl.	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Fidelity Equity Inc. II	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
SP	MSI Sm. Co. Growth B	$1,001 - $15,000		NONE	P
SP	Fid. Mgd. Inc. Port	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	Vanguard Money Market Reserve Prime Portfolio	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Manulife Financial Venture Vision Annuity	$100,001 - $250,000		NONE	S
	T. Rowe Price Variable Annuity	$100,001 - $250,000		NONE	
	Trust U/A 8-25-41, James M. Castle Trust #1, 16.66% Allocable share of trust income per K-1	N/A	DIVIDENDS	$201 - $1,000	
	JMC Trust #1 Wachovia PT Money Market (successor to First Union)	$1,001 - $15,000	As noted above	As noted above	
	JMC Trust #1 Evergreen Core Bond Fund (successor to Evergreen Income Plus Fund)	$15,001 - $50,000	As noted above	As noted above	
	JMC Trust #1 Evergreen Large Cap Equity Fund (successor to Evergreen Stock Selector Fund)	$15,001 - $50,000	As noted above	As noted above	

	Trust U/A 1-21-53 James M. Castle Trust #3, 16.66% interest Allocable share of trust income per K-1	N/A	DIVIDENDS	$5,001 - $15,000
	JMC Trust #3 Wachovia PT Money Market (successor to First Union Money Market)	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 Evergreen Core Bond Fund (successor to Evergreen Income Plus Fund	$50,001 - $100,000	As noted above	As noted above
	JMC Trust #3 DuPont Co.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 GE Co.	$15,001 - $50,000	As noted above	As noted above
	JMC Trust #3 Coca Cola	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 H.J. Heinz Co.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 Proctor & Gamble Co.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 Ford Motor Co.	$1 - $1,000	As noted above	As noted above
	JMC Trust #3 Home Depot	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 Intel Corp.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #3 Motorola Inc.	$1,001 - $15,000	As noted above	As noted above

JMC Trust #3 Wyeth (formerly American Home Products)	$15,001 - $50,000	As noted above	As noted above	
JMC Trust #3 Bristol Myers Squibb Co.	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 Johnson & Johnson	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 BP PLC	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 Exxon Mobil	$15,001 - $50,000	As noted above	As noted above	
JMC Trust #3 SBC Communication	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 Verizon Communications	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 Bank of New York Co.	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 JP Morgan Chase	$1,001 - $15,000	As noted above	As noted above	
JMC Trust #3 Mellon Financial Corp.	$1 - $1,000	As noted above	As noted above	
Trust U/A 1-4-46, James M. Castle Trust #2, 16.66% interest changed from 11.11% due to death of sibling. Allocable shares of trust income per K-1	N/A	DIVIDENDS	$1,001 - $2,500	
JMC Trust #2 Wachovia PT Money Market (successor to First Union Money Market)	$1,001 - $15,000	As noted above	As noted above	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

	JMC Trust #2 Core Bond Fund (successor to Evergreen Income Plus Fund)	$15,001 - $50,000	As noted above	As noted above
	JMC Trust #2 General Electric Co.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #2 Home Depot, Inc.	$1,001 - $15,000	As noted above	As noted above
	JMC Trust #2 Abbot Labs	$15,001 - $50,000	As noted above	As noted above
	JMC Trust #2 Bristol Myers Squibb Co.	$1 - $1,000	As noted above	As noted above
	JMC Trust #2 Exxon Mobil Corp.	$1 - $1,000	As noted above	As noted above
	JMC Trust #2 Bank of New York	$1 - $1,000	As noted above	As noted above
	JMC Trust #2 Mellon Financial Corp.	$1 - $1,000	As noted above	As noted above
	JMC Trust #2 Cisco Systems	$1 - $1,000	As noted above	As noted above
	JMC Trust #2 Hewlett Packard Co.	$1 - $1,000	As noted above	As noted above
	James M. Castle, Jr. Trust 8-27-68 allocable share trust income per K-1	N/A	DIVIDENDS	$15,001 - $50,000
	James M. Castle, Jr. Trust Wachovia PT Money Market (formerly First Union Money Market)	$15,001 - $50,000	As noted above	As noted above
	James M. Castle, Jr. Trust Delaware Trust Municiple Bond Fund	$250,001 - $500,000	As noted above	As noted above

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

	James M. Castle, Jr. Trust DuPont	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust General Electric	$15,001 - $50,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Colgate Palmolive Co.	$15,001 - $50,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Abbot Labs	$15,001 - $50,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Cigna Corp.	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Glaxo Smith Kline	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust BP PLC	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Chevron/Texaco Corp.	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Pepco Holdings, Inc. (formerly Potomac Electric)	$1,001 - $15,000	As noted above	As noted above	S (partial)
	James M. Castle, Jr. Trust Westar Energy, Inc. (formerly Western Reserve)	$1,001 - $15,000	As noted above	As noted above	
	James M. Castle, Jr. Trust Alltel Corp.	$15,001 - $50,000	As noted above	As noted above	S
	James M. Castle, Jr. Trust Anthem	$1,001 - $15,000	As noted above	As noted above	P
	James M. Castle, Jr. Trust Evergreen Large Cap Equity Fund (successor to Evergreen Stock Selector Fund)	$100,001 - $250,000	As noted above	As noted above	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael N. Castle

	James M. Castle, Jr. Trust Evergreen Intl. Equity Fund	$1,001 - $15,000	As noted above	As noted above	P
	James M. Castle, Jr. Trust Cigna Corp.	$1,001 - $15,000	As noted above	As noted above	S

SCHEDULE IV - TRANSACTIONS

Name Michael N. Castle

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Cohen & Steers Real Estate	P	Quarterly	$1,001 - $15,000
	Boston Partners Small Cap Value II	P	8/27/03	$15,001 - $50,000
	FPA Crescent Inst. Shares	P	8/27/03	$15,001 - $50,000
	Heartland Value Fund	P	8/27/03	$15,001 - $50,000
	Oakmark Global Fund	P	8/27/03	$15,001 - $50,000
	Wm. Blair Small Cap Growth Fund	P	8/27/03	$15,001 - $50,000
	Del. State General Obligation due 5/1/07 Zero Coupon	P	5/16/03	$1,001 - $15,000
	MLM Index Fund Enhanced Ser. (a managed future fund)	P	11/13/03	$15,001 - $50,000
	Fidelity Floating Rate High Income	P	1/23/03	$15,001 - $50,000
	Oakmark Equity and Income Fund	P	1/23/03	$1,001 - $15,000
	PBHG IRA Capital Preservation	P	1/23/03	$50,001 - $100,000
	Liberty Acorn Twenty Class Z	P	9/4/03	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name Michael N. Castle

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Legg Mason Capital Opportunity Fund	P	9/2/03	$15,001 - $50,000
	Aegis Value Fund	P	9/4/03	$15,001 - $50,000
	Aegis Value Fund	P	12/3/03	$1,001 - $15,000
	4566 Parkside Drive Kiawah Island, S.C.	P	5/23/03	$250,001 - $500,000
	Vanguard Intermediate Term Tax Exempt Fund	P	Monthly	$1,001 - $15,000
	Dodge & Cox Balanced Fund	P	Quarterly	$1,001 - $15,000
	James M. Castle, Jr. Trust Anthem	P	12/12/03	$1,001 - $15,000
	James M. Castle, Jr. Trust Evergreen Intl. Equity Fund	P	12/12/03	$1,001 - $15,000
	Caldwell & Orkin Market Opportunity Fund	S	8/25/03	$50,001 - $100,000
	American Century Target 2015 Fund	S	8/27/03	$15,001 - $50,000
	American Century Target 2010 Fund	S	8/27/03	$1,001 - $15,000
	American Century Target 2025 Fund	S	8/27/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Michael N. Castle

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	FBR Financial Services Fund	S	8/27/03	$15,001 - $50,000
	Artisan Inter. Fund	S	8/27/03	$15,001 - $50,000
	Janus Overseas Fund	S	8/27/03	$15,001 - $50,000
	DE General Obligation due 5/1/03 Zero Coupon	S	5/1/03	$15,001 - $50,000
	Freemarkets, Inc.	S	5/21/03	$1,001 - $15,000
	General Motors Corp. CLH	S	5/21/03	$1,001 - $15,000
	Liberty Media Corp A	S	5/21/03	$1,001 - $15,000
	Nortel Networks Corp.	S	5/21/03	$1,001 - $15,000
	Sun Microsystems, Inc.	S	5/21/03	$1,001 - $15,000
	Weatherford Intl. Inc.	S	5/21/03	$15,001 - $50,000
	PBHG IRA Capital Preservation (IRA)	S	9/3/03	$15,001 - $50,000
	Fidelity Cash Reserves (IRA)	S	1/23/03	$100,001 - $250,000

SCHEDULE IV - TRANSACTIONS

Name Michael N. Castle

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Buffalo Small Cap Fund	S	5/22/03	$15,001 - $50,000
	Vanguard Tax Managed Growth and Income Fund	S	8/25/03	$15,001 - $50,000
	Manulife Venture Vision Annuity Fund	S	5/28/03	$100,001 - $250,000
	James M. Castle, Jr. Trust Pepco Holdings, Inc. (formerly Potomac Electric)	S	12/24/03	$1,001 - $15,000
	James M. Castle, Jr. Trust Cigna	S	12/12/03	$1,001 - $15,000
	James M. Castle, Jr. Trust Alltel Corp.	S	12/12/03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Michael N. Castle

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Wilmington Trust Company	26.67% of mortgage of 300-322 West Ninth Street, Wilmington, DE	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Michael N. Castle

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute Conference "Challenge of Education Reform"	Feb. 14-19	Philadelphia, PA - Montego Bay, Jamaica -- Philadelphia, PA	Y	Y	Y	N/A
Aspen Institute Conference Political Islam: Challenges for US Policy	Jun 27-Jul 3	New York, NY -- Helsinki, Finland -- New York, NY	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Michael N. Castle

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	James B. Hunt, Jr. Institute for Educational Leadership and Policy
Board of Directors	Southern Institute on Children & Families

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

9

2004 MAY 17 PM 3:20

HC (Office Use Only)

STEVEN J. CHABOT (Full Name)

3014 HARRISON AVE. (Mailing Address)

CINCINNATI OHIO 45211

Daytime Telephone: 513-662-8000

Filer Status	☒ Member of the U.S. House of Representatives	State: District:	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Steven J. Chabot	5/13/04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
NONE		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500
	NONE			

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B		Block C		Block D		Block E
SP, DC, JT			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Examples:	SP	Mega Corp Stock						
			Simon & Schuster	Indefinite				Royalties	
		JT	1st Bank of Paducah, KY accounts	F X		RENT X	VI X		P
	JANUS FUND		D X				I X		
	SELECTED AMERICAN SHARES FUND		D X		DIVIDENDS X		II X		
	VANGUARD 500 INDEX FUND		D X		DIVIDENDS X		III X		
	VANGUARD TOTAL MARKET FUND		D X		DIVIDENDS X		III X		
	CHARLES SCHWAB + CO.		B X				I X		
	APPLEBEES COMMON STOCK		E X		DIVIDENDS X		II X		

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name STEVEN J. CHABOT

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	CINTAS COMMON STOCK			X				X					X					
	COCA COLA COMMON STOCK		X					X						X				
	PEPSICO COMMON STOCK		X					X					X					
	DISNEY COMMON STOCK		X					X										
	GRADISON MONEY MKT.							X										
	PNC BANK ACCTS								X				X					
	CHEVIOT B+L CD's								X					X				
	USA BANK		X						X									
	WESTWOOD HOMESTEAD CD's			X					X					X				
	BERGER FUND IRA							X										
	COLUMBIA SPECIAL FUND IRA							X										
	GATEWAY INDEX ALLS ED IRA							X										
	KAUFMANN FUND IRA							X										
	OHIO PUBLIC EMPLOYEES DEFERRED COMP FUND																	
	OHIO PERS			X														

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Name STEVEN J. CHABOT | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	NONE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
CHINESE INTERNATIONAL ECONOMIC COOPERATION ASSN.	JAN. 13-21 ~~MARCH 16-18~~	CINCINNATI, OHIO - TAIPEI, TAIWAN - TOKYO, JAPAN, - WASH DC	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
DEC 85 - 94 PAID INTO	OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM (PERS)	UPON RETIREMENT
MAY 90 - DEC PAID INTO 94	" " " DEFERRED COMPENSATION	AT AGE 55

GPO 2004 91-510 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 3:33
U.S. HOUSE OF REPRESENTATIVES

(6)
MC

Albert Benjamin Chandler III
(Full Name)

975 Pisgah Pike Versailles, KY 41017
(Mailing Address)

202-225-4706
Daytime Telephone

Filing (Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives	State: KY District: 06	☐ Officer Or Employee — Employing Office.
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	A.B. Chandler III	05-13-04

778

SCHEDULE I - EARNED INCOME

Name Albert Benjamin Chandler III

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Attorney General of Kentucky	Salary	$88,884

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Albert Benjamin Chandler III

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Woodford Sun, Inc. Stock (Newspaper) 184 S. Main St. Versailles, KY	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	n/a
JT	Polly Place Farm, Inc., Stock (300 acre farm) 191 Elm St. Versailles, KY	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	n/a
JT	Lipid Sciences, Inc. Stock	$15,001 - $50,000	n/a	NONE	n/a
JT	Bank One, Inc. Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Albert Benjamin Chandler III

	KY Public Employee Deferred Comp. MSF Growth Fund A Mutual Fund	$15,001 - $50,000	n/a (Deferred comp. / No withdrawals)	NONE	P
	KY Public Employee Deferred Comp. Fidelity Contra Fd. Mutual Fund	$15,001 - $50,000	n/a (Deferred comp. / No withdrawals)	NONE	P
	KY Retirement Systems Account	$50,001 - $100,000	(No benefits received)	NONE	n/a
SP	KY Retirement Systems Account	$15,001 - $50,000	(No benefits received)	NONE	n/a
JT	Rental Unit 975 Pisgah Pike Versailles, KY	$1,001 - $15,000	RENT	$2,501 - $5,000	n/a
JT	Fishbuds Funding Stock (Restaurant-Indianapolis, IN) 510 E. 96 St., Ste 125 Indianapolis, IN	None	CAPITAL GAINS/ DIVIDENDS	$15,001 - $50,000	PS
JT	Fishbuds Funding Stock (Restaurant-Louisville, KY) 510 E. 96 St., Ste 125 Indianapolis, IN	None	DIVIDENDS	$201 - $1,000	PS
JT	Fishbuds Funding Stock (Restaurant-Greenwood, IN) 510 E. 96 St., Ste 125 Indianapolis, IN	None	CAPITAL GAINS/ DIVIDENDS	$2,501 - $5,000	PS
JT	US EE Bonds	$50,001 - $100,000	(Bonds held, not cashed)	NONE	P

SCHEDULE IV - TRANSACTIONS

Name Albert Benjamin Chandler III

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	KY Public Employee Deferred Comp. MSF Growth Fund A Mutual Fund	P	2003 (monthly)	$1,001 - $15,000
	KY Public Employee Deferred Comp. Fidelity Contra Fd. Mutual Fund	P	2003 (monthly)	$1,001 - $15,000
JT	Fishbuds Funding Stock (Restaurant-Indianapolis, IN) 510 E. 96 St., Ste 125 Indianapolis, IN	S	Sept. 2003 (approx.)	$15,001 - $50,000
JT	Fishbuds Funding Stock (Restaurant-Louisville, KY) 510 E. 96 St., Ste 125 Indianapolis, IN	S	Sept. 2003 (approx.)	$15,001 - $50,000
JT	Fishbuds Funding Stock (Restaurant-Greenwood, IN) 510 E. 96 St., Ste 125 Indianapolis, IN	PS	P-Feb. 2003 (approx.) S-Aug. 2003 (approx.)	$15,001 - $50,000
JT	US EE Bonds	P	2003 (monthly)	$1,001 - $15,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

22

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 1:26
MC
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Joseph Christopher Chocola
(Full Name)

510 Cannon HOB
Washington D.C. 20515
(Mailing Address)

202-225-3915
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: IN District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J Chris Chocola	5/6/04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Joseph Christopher Chocola | Page 2 of 22

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Owner	Block A Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP	SP. Mega Corp Stock					X								X										X								P
DC, JT	Examples: Simon & Schuster (Indefinite); 1st Bank of Paducah, KY accounts						X									X				Royalties						X			X			
	Aluminum Co. of America						X							X			X									X						S, P
	American Power Conversion					X								X			X									X						S, P
	Applied Materials					X											X										X					S, P
	BP Amoco					X								X											X							n/a
	Barrick Gold Corp	X															X								X							S
	Biogen Inc	X															X							X								S, P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph Christopher Chocola

Page 3 of 22

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Biomet			X				X						X							P
	Bristol Myers Squibb			X				X									X				S, P
	Cabot Corp			X								X									P
	Cardinal Health Inc.							X					X								P
	Chevron Texaco Corp			X				X						X							P
	Citigroup							X		X											S, P
	Coca-Cola							X		X							X				S, P
	Dell Computer Corporation											X									P
	Devon Energy Corp			X				X					X								P
	Diamonds Trust Series	X						X					X								S, P
	Dover Corp							X						X							P
	Emerson Electric							X		X							X				S
	Estee Lauder			X				X								X					S, P
	Exxon Mobil							X								X					S
	Federal National Mortgage Assn	X						X						X							S
	Flextronics			X								X									S, P
	Genentech	X								X								X			S, P
	General Dynamics	X						X						X							S, P
	General Electric			X				X		X							X				S, P
	Genuine Parts			X				X								X					P
	Honeywell							X						X							P
	Illinois Tool Works							X							X						P

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph Christopher Chocola

Page 4 of 22

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P, S, E)
		A None; C $1,001 – $15,000; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000	DIVIDENDS; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; Other Type of Income (Specify)	I None; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VII $15,001 – $50,000; IX $100,001 – $1,000,000; XI Over $5,000,000	
	Int'l Business Machines		X	III	P
	Intel Corp		X	IV	S
	International Paper Co.	X	X	IV	S, P
	KLA Tencor Corp	X	X	V	S, P
	Kennametal, Inc.		X	III	P
	L-3 Communication Holdings Inc			I	P
	Limited	X	X	VII	S, P
	Lincare			I	P
	Lincoln National Corp	X	X	III	S, P
	MBNA Corp	X	X	VII	S, P
	Medtronic, Inc		X	III	P
	Microsoft		X	IV	S, P
	Minnesota Mining & Mfg		X	VII	S, P
	NASDAQ 100 Index	X	X	VII	S, P
	Newell Co. Inc.	X	X	IV	S, P
	Northern Trust Corp		X	III	P
	Oracle Systems	X	X	IV	S, P
	Peoplesoft, Inc.			I	P
	Pfizer		X	X	S, P
	Qualcomm Inc.		X	V	S, P
	S&P Midcap 400 Depository	X	X X	VII	S, P
	SBC Communications			I	P

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph Christopher Chocola

Page 5 of 22

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Schlumberger, LTD							X					X						P
	Standard: Poors Depository	X							X							X			S, P
	Starbucks Corp			X										X					S
	Sun Trust Banks	X						X	X							X			S, P
	Target Corp											X							P
	Time Warner Inc.											X							P
	Walgreen Company			X				X					X						P
	Walmart Stores			X				X					X						S, P
	Washington Mutual, Inc.	X						X					X						S, P
	Web Ex Communications Inc	X							X				X						S
	Weight Watchers			X								X							P
	Weiner Enterprises	X						X	X						X				S
	Williams Sonoma			X					X						X				S, P
	Yahoo!, Inc	X							X						X				S
	Artisan International Fund							X	X						X				S, P
	Japan Webs			X				X					X						S
	Ishares MSCI Hong Kong Index Fund							X					X						P
	ishares Lehman 20+ Year T Bond Fund	X						X	X						X				S, P
	Dell April 27 1/2 Calls	X							X				X						S
	Fed Nat'l Mortgage March 60 calls	X							X						X				S
	General Dynamics Feb Calls	X							X					X					S
	Lincoln National Corp 3/45 Calls	X							X						X				S

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph Christopher Chocola | Page 6 of 22

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	IV $1,501 - $2,500	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Merck February Calls	X							X					X					S
	Merck March calls	X												X					S
	S&P M. Leaps, too much calls	X							X					X					S
	Walmart March Calls	X							X				X						S
	Fayetteville, AR Schools AR	X							X					X					S
	Oklahoma City Ok AAA/AAA								X						X				P
	US Treasury Note	X							X	X				X					S
	Federal Farm Credit Bank 12/30/03	X							X						X				S
	Fed Home loan Bank 2/13/09				X				X							X			n/a
	Fed Home loan Bank 9/12/06								X							X			n/a
	Fed Home loan Bank 10/13/06				X				X							X			n/a
	Fed Home loan Bank 2/6/12			X					X								X		S
	Fed Home loan Bank 2/13/12				X				X							X			S
	Fed Home loan Bank 5/10/12				X				X							X			n/a
	Fed Farm Credit Bureau 6/14/12								X							X			n/a
	Fed Farm Credit Bank 12/29/15					X			X								X		n/a
	US Treasury Note 11/30/03	X							X					X					S, P
	Pleasant Street Homes, Bristol, CT			X								X							n/a
	Berkshire Hathaway BS					X						X							n/a
	Clayton Homes	X						X		X							X		S
	Dollar General							X							X				P
	Dover Corp					X		X							X				P

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph Christopher Chacola

Page 7 of 22

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	D	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	L	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	ROYALTIES	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II	III $201 – $1,000	IV	V $2,501 – $5,000	VI	VII $15,001 – $50,000	VIII	IX $100,001 – $1,000,000	X	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Emmis Communications					X										X											S
	Fifth Third Bank															X											n/a P
	Hon Industries					X				X																	n/a
	Lamar Advertising					X										X											n/a
	Leggett and Platt					X				X																	P
	McDonald's Corp					X				X										X							P
	Merck & Co.															X											P
	Mercury General					X				X																	n/a
	National City Corp	X										X							X								S
	Walgreen Co.				X					X							X										P
	Walt Disney					X				X									X								n/a
	Pinnacle Bldg Systems											X						X									n/a
	Pinnacle Rec'l Estate											X										X					n/a
	Qual Run Ltd															X											n/a
	Elkhart County Fair Lot (Nonrec)					X					X								X								n/a
	American Securities Port LP						X					X					X										n/a
	Capital National Bank									X											X						n/a
	St Joe County Vacant Res Lot				X											X											n/a
	Cannot Cash Michigan Vacant residential lot															X											n/a
	Elkhart Sportsplex, Indiana															X											n/a
	Cash & Equivalents							X				X												X			n/a
	Dorchester Capital						X					X	X									X					P

Name Joseph Christopher Chocola | Page 8 of 22

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Dorchester Capital, Hedge Fund	X			1/2/03					X					
	See attached														

This page may be copied if more space is required.

STATEMENT OF ACCOUNT

9 of 22

Martin Capital Management, LLP

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
PURCHASES					
01-30-03	02-04-03	900	DOLLAR GENERAL	11.03	9,928.44
01-31-03	02-05-03	100	DOLLAR GENERAL	11.01	1,100.55
02-03-03	02-06-03	1,000	DOLLAR GENERAL	11.47	11,468.00
01-30-03	02-04-03	2,100	DOVER CORP.	26.10	54,817.35
10-29-03	11-03-03	3,100	FIFTH THIRD	57.32	177,691.69
12-12-03	12-17-03	1,800	LEGGETT AND PLATT	21.00	37,799.10
01-14-03	01-17-03	1,700	MCDONALD'S CORP.	16.97	28,842.88
12-02-03	12-05-03	4,400	MERCK & CO.	42.59	187,412.28
10-10-03	10-14-03	500,000	U.S. TREASURY NOTES 3.000% Due 11-30-03	100.27	501,328.13
10-16-03	10-21-03	600	WALGREEN CO.	32.73	19,637.58
10-17-03	10-22-03	400	WALGREEN CO.	32.75	13,098.80
10-20-03	10-23-03	600	WALGREEN CO.	32.75	19,648.50
					1,062,773.30
SALES					
09-29-03	09-29-03	14,000	CLAYTON HOMES	12.50	175,000.00
09-29-03	09-29-03	2,700	CLAYTON HOMES	12.50	33,750.00
09-29-03	09-29-03	2,200	CLAYTON HOMES	12.50	27,500.00
09-29-03	09-29-03	200	CLAYTON HOMES	12.50	2,500.00
09-29-03	09-29-03	200	CLAYTON HOMES	12.50	2,500.00
09-29-03	09-29-03	700	CLAYTON HOMES	12.50	8,750.00
09-29-03	09-29-03	4,000	CLAYTON HOMES	12.50	50,000.00
09-29-03	09-29-03	12,000	CLAYTON HOMES	12.50	150,000.00
09-29-03	09-29-03	700	CLAYTON HOMES	12.50	8,750.00
09-29-03	09-29-03	3,300	CLAYTON HOMES	12.50	41,250.00
04-22-03	04-25-03	3,900	EMMIS COMM.CL A	19.59	76,402.10
01-29-03	02-03-03	15,000	GAP STORES	14.71	220,611.86
10-30-03	10-31-03	250,000	U.S. TREASURY NOTES 3.000% Due 11-30-03	100.16	250,390.63
12-01-03	12-01-03	250,000	U.S. TREASURY NOTES 3.000% Due 11-30-03	100.00	250,000.00
12-30-03	12-31-03	17,800	UNION ACCEPTANCE CORP CL A	0.05	890.00
01-02-03	01-07-03	1,200	WABASH NATIONAL CORP.	8.47	10,162.49
01-03-03	01-08-03	100	WABASH NATIONAL CORP.	8.60	859.97
01-15-03	01-21-03	600	WABASH NATIONAL CORP.	8.70	5,219.84
					1,314,536.89

MARTIN
CAPITAL MANAGEMENT, LLP
Registered Investment Advisor

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
PURCHASES					
03-14-03	03-19-03	2,000	Aluminum Co. of America	20.31	40,620.00
03-24-03	03-27-03	500	Aluminum Co. of America	21.04	10,520.00
04-14-03	04-17-03	850	Aluminum Co. of America	21.74	18,479.00
08-18-03	08-21-03	650	Aluminum Co. of America	28.08	18,250.00
08-26-03	08-29-03	1,500	Amer International Group	59.76	89,643.90
06-02-03	06-05-03	4,000	American Power Conversion	15.88	63,536.40
07-02-03	07-08-03	1,000	American Power Conversion	15.72	15,719.70
04-21-03	04-24-03	1,000	Applied Materials	15.06	15,058.40
07-02-03	07-08-03	1,300	Applied Materials.	16.18	21,034.00
07-07-03	07-10-03	700	Applied Materials	17.25	12,072.57
09-26-03	10-01-03	3,500	Applied Materials	18.97	66,388.70
09-30-03	10-03-03	500	Applied Materials	18.61	9,305.00
10-03-03	10-08-03	500	Applied Materials	19.81	9,905.00
01-06-03	01-09-03	1,250	BankAmerica Corp.	70.94	88,675.00
04-21-03	04-24-03	1,500	Biogen, Inc.	36.16	54,239.10
06-04-03	06-09-03	2,250	Biomet, Inc.	28.93	65,103.53
07-07-03	07-10-03	500	Biomet, Inc.	28.81	14,405.00
03-24-03	03-27-03	575	Bristol Myers Squibb	21.57	12,402.75
06-02-03	06-05-03	625	Bristol Myers Squibb	26.34	16,462.50
09-12-03	09-17-03	375	Bristol Myers Squibb	26.43	9,912.50
12-03-03	12-08-03	2,250	Cabot Corp.	30.23	68,023.80
12-08-03	12-11-03	500	Cabot Corp.	31.07	15,536.15
09-11-03	09-16-03	1,500	Cardinal Health Inc	57.73	86,602.35
09-22-03	09-25-03	250	Cardinal Health Inc	58.64	14,661.23
11-07-03	11-13-03	500	Cardinal Health Inc	57.70	28,850.00
09-24-03	09-29-03	475	ChevronTexaco Corp.	72.86	34,610.62
12-05-03	12-10-03	525	ChevronTexaco Corp.	78.11	41,005.25
07-22-03	07-25-03	500	Citigroup	45.50	22,750.00
05-01-03	05-06-03	1,500	Coca-Cola	40.05	60,075.00
11-20-03	11-25-03	1,750	Coca-Cola	46.66	81,660.78
11-21-03	11-26-03	500	Coca-Cola	46.50	23,250.45
01-06-03	01-09-03	2,500	Dell Computer Corporation	28.52	71,297.50
01-09-03	01-14-03	500	Dell Computer Corporation	28.82	14,410.80
07-09-03	07-14-03	1,000	Devon Energy Corp	51.78	51,783.60
07-25-03	07-30-03	250	Devon Energy Corp	48.14	12,035.00
08-28-03	09-03-03	750	Diamonds Trust Series I	93.72	70,290.00
09-22-03	09-25-03	750	Diamonds Trust Series I	95.55	71,664.30
08-18-03	08-21-03	1,825	Dover Corp.	38.12	69,569.00
08-26-03	08-29-03	700	Dover Corp.	37.28	26,097.00
08-18-03	08-21-03	2,000	E.I. du Pont Nemours & Co.	44.41	88,820.80
04-02-03	04-07-03	2,000	Equity Office Properties Trust	26.44	52,882.40
04-16-03	04-22-03	1,500	Estee Lauder	30.07	45,100.95
04-17-03	04-23-03	250	Estee Lauder	30.57	7,643.25

Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
06-02-03	06-05-03	600	Estee Lauder	33.31	19,988.00
08-20-03	08-25-03	500	Estee Lauder	33.56	16,780.00
07-02-03	07-08-03	4,500	Flextronics	10.58	47,624.85
07-14-03	07-17-03	1,500	Flextronics	12.34	18,514.95
09-25-03	09-30-03	750	Flextronics	14.32	10,740.00
04-15-03	04-21-03	1,500	Genentech Inc.	35.21	52,809.45
04-29-03	05-02-03	500	Genentech Inc.	38.12	19,062.20
01-23-03	01-28-03	500	General Dynamics	63.95	31,975.00
08-19-03	08-22-03	1,000	General Electric	29.89	29,892.00
01-15-03	01-21-03	1,000	Genuine Parts	31.20	31,200.00
03-24-03	03-27-03	1,000	Genuine Parts	30.27	30,267.00
05-14-03	05-19-03	600	Genuine Parts	32.88	19,730.00
05-22-03	05-28-03	400	Genuine Parts	33.16	13,265.24
04-14-03	04-17-03	1,375	Harley Davidson	42.38	58,271.13
06-11-03	06-16-03	275	Harley Davidson	43.28	11,902.50
10-15-03	10-20-03	2,500	Honeywell (New)	29.34	73,355.00
11-06-03	11-12-03	500	Honeywell (New)	30.45	15,225.00
11-07-03	11-13-03	500	Honeywell (New)	30.68	15,340.00
05-28-03	06-02-03	1,500	Illinois Tool Works	63.61	95,420.40
04-14-03	04-17-03	750	Int'l Business Machines	80.02	60,015.00
06-11-03	06-16-03	235	Int'l Business Machines	83.61	19,647.47
07-17-03	07-22-03	265	Int'l Business Machines	83.21	22,050.30
08-13-03	08-18-03	2,250	International Paper Co.	39.82	89,594.78
08-14-03	08-19-03	350	International Paper Co.	40.39	14,137.50
07-18-03	07-23-03	4,500.0000	Japan Webs	7.66	34,475.85
07-22-03	07-25-03	2,000.0000	Japan Webs	7.64	15,280.00
10-09-03	10-15-03	4,500.0000	Japan Webs	9.45	42,506.55
06-18-03	06-23-03	1,500	Johnson & Johnson	54.87	82,305.00
01-02-03	01-07-03	600	KLA Tencor Corp	36.87	22,123.80
10-14-03	10-17-03	1,500	Kennametal, Inc.	40.41	60,619.35
10-20-03	10-23-03	350	Kennametal, Inc.	39.82	13,935.87
12-23-03	12-29-03	750	Kennametal, Inc.	40.05	30,040.13
03-05-03	03-10-03	1,000	Kraft Foods Inc.	27.98	27,981.80
03-24-03	03-27-03	500	Kraft Foods Inc.	30.11	15,055.00
01-03-03	01-08-03	500	L-3 Communications Holdings Inc.	47.15	23,575.00
03-24-03	03-27-03	200	L-3 Communications Holdings Inc.	40.53	8,106.00
06-02-03	06-05-03	350	L-3 Communications Holdings Inc.	43.97	15,390.50
06-12-03	06-17-03	650	L-3 Communications Holdings Inc.	43.27	28,123.50
09-25-03	09-30-03	2,500	Limited	15.27	38,175.00
09-30-03	10-03-03	500	Limited	15.32	7,660.00
11-24-03	11-28-03	2,000	Lincare	29.16	58,330.00
11-28-03	12-03-03	750	Lincare	30.20	22,647.60
01-06-03	01-09-03	1,500	Lincoln National Corporation	34.38	51,570.00
01-02-03	01-07-03	225	Lowe's	39.08	8,793.50
01-13-03	01-16-03	2,400	MBNA Corp.	20.25	48,600.00

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
01-22-03	01-27-03	600	MBNA Corp.	17.73	10,638.00
01-23-03	01-28-03	820	MBNA Corp.	15.34	12,578.80
01-24-03	01-29-03	500	MBNA Corp.	16.44	8,220.00
12-05-03	12-10-03	575	Medtronic, Inc.	46.77	26,891.00
01-06-03	01-09-03	500	Microsoft Corp.	55.12	27,560.00
04-02-03	04-07-03	500	Microsoft Corp.	25.80	12,902.25
08-21-03	08-26-03	750	Microsoft Corp.	26.75	20,066.25
05-21-03	05-27-03	750	Minnesota Mining & Mfg.	123.81	92,857.50
09-08-03	09-11-03	250	Minnesota Mining & Mfg.	137.82	34,455.00
01-06-03	01-09-03	2,500	NASDAQ 100 Index	26.29	65,725.00
07-01-03	07-07-03	5,000	NASDAQ 100 Index	29.80	149,000.00
01-15-03	01-21-03	250	Newell Co Inc	29.57	7,392.50
06-12-03	06-17-03	515	Newell Co Inc	28.36	14,604.31
05-02-03	05-07-03	1,500	Northern Trust Corp.	35.72	53,577.00
07-02-03	07-08-03	500	Northern Trust Corp.	41.30	20,650.00
02-04-03	03-27-03	100,000	Oklahoma City, OK AAA/AAA (C 1X 3-1-13 @100) FGIC 4.000% Due 03-01-14	100.00	100,000.00
01-09-03	01-14-03	1,650	Oracle Systems	12.84	21,179.73
01-22-03	01-27-03	400	Pan Pacific Retail	35.57	14,230.00
01-27-03	01-30-03	600	Pan Pacific Retail	35.54	21,324.00
07-14-03	07-17-03	4,000	Peoplesoft Inc.	17.99	71,959.60
07-25-03	07-30-03	1,150	Peoplesoft Inc.	16.61	19,101.50
04-14-03	04-17-03	750	Pfizer	31.89	23,917.50
06-06-03	06-11-03	2,150	Qualcomm Incorporated	34.97	75,193.46
07-14-03	07-17-03	600	Qualcomm Incorporated	39.54	23,726.00
02-18-03	02-19-03	19,083.9690	Rydex Series Trust URSA Fund	13.10	250,000.00
02-24-03	02-25-03	3,731.3430	Rydex Series Trust URSA Fund	13.40	50,000.00
11-14-03	11-17-03	9,922.5560	Rydex Series Trust URSA Fund	10.33	102,500.00
01-28-03	01-31-03	400	S&P Midcap 400 Depository Receipt	75.59	30,235.08
03-27-03	04-01-03	1,000	S&P Midcap 400 Depository Receipt	75.36	75,360.00
11-25-03	12-01-03	1,750	SBC Communications	23.47	41,072.50
11-28-03	12-03-03	1,000	SBC Communications	23.26	23,260.00
04-23-03	04-28-03	1,250	Schlumberger, LTD	41.37	51,712.50
08-18-03	08-21-03	500	Schlumberger, LTD	48.10	24,050.00
12-03-03	12-08-03	250	Schlumberger, LTD	47.93	11,982.50
10-09-03	10-15-03	3,000	Schwab Corporation	13.38	40,144.80
03-25-03	03-28-03	1,725	Standard & Poors Depository Receipts	87.02	150,100.88
03-27-03	04-01-03	275	Standard & Poors Depository Receipts	87.28	24,001.25
07-01-03	07-07-03	1,750	Standard & Poors Depository Receipts	96.88	169,540.00
04-15-03	04-21-03	1,000	SunTrust Banks Inc.	57.00	57,001.50
06-02-03	06-05-03	350	SunTrust Banks Inc.	59.74	20,909.23
06-19-03	06-24-03	350	SunTrust Banks Inc.	59.93	20,976.57
12-16-03	12-19-03	1,000	Target Corp	37.40	37,400.00
12-18-03	12-23-03	2,200	Time-Warner, Inc.	17.78	39,108.74

Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
12-31-03	01-06-04	500	Time-Warner, Inc.	18.03	9,015.00
10-09-03	10-15-03	1,500	Walgreen Company	33.02	49,528.20
12-18-03	12-23-03	500	Walgreen Company	35.58	17,790.00
09-30-03	10-03-03	450	Walmart Stores	56.42	25,389.50
07-16-03	07-21-03	2,000	Washington Mutual Inc.	41.68	83,354.20
12-26-03	12-31-03	1,350	Weight Watchers	36.71	49,563.50
07-25-03	07-30-03	3,000	Williams Sonoma	28.30	84,890.40
08-26-03	08-29-03	350	Williams Sonoma	29.83	10,441.50
08-01-03	08-06-03	3,000.0000	iShares Lehman 20+ Year T-Bond Fund	82.66	247,980.00
10-27-03	10-30-03	4,000.0000	iShares MSCI Hong Kong Index Fund	9.92	39,680.00
					5,947,192.75
REINVESTED DIVIDENDS					
11-13-03	11-13-03	65.3500	Artisan International Fund	17.55	1,146.91
					1,146.91
SALES					
01-09-03	01-14-03	500	Aluminum Co. of America	22.36	11,179.66
10-16-03	10-21-03	650	Aluminum Co. of America	30.57	19,870.28
10-16-03	10-21-03	350	Aluminum Co. of America	30.57	10,699.38
11-20-03	11-25-03	1,500	Amer International Group	56.92	85,375.39
11-05-03	11-10-03	1,500	American Power Conversion	21.14	31,713.31
07-22-03	07-25-03	700	Applied Materials	18.60	13,023.16
07-22-03	07-25-03	300	Applied Materials	18.60	5,581.36
08-13-03	08-18-03	1,000	Applied Materials	18.79	18,792.62
08-13-03	08-18-03	3,000	Applied Materials	18.79	56,377.84
08-13-03	08-18-03	1,000	Applied Materials	18.79	18,792.62
11-12-03	11-17-03	500	Applied Materials	25.26	12,631.70
06-25-03	06-26-03	3,160.5560	Artisan International Fund	15.82	50,000.00
02-21-03	02-26-03	1,200	BankAmerica Corp.	70.87	85,039.43
02-24-03	02-27-03	50	BankAmerica Corp.	69.15	3,457.39
01-28-03	01-31-03	1,500	Barrick Gold Corp.	16.25	24,374.26
01-29-03	02-03-03	500	Barrick Gold Corp.	16.36	8,179.75
01-29-03	02-03-03	1,500	Barrick Gold Corp.	16.36	24,539.26
01-06-03	01-09-03	350	Biogen, Inc.	41.11	14,389.81
01-06-03	01-09-03	650	Biogen, Inc.	41.11	26,723.94
01-21-03	01-24-03	1,100	Biogen, Inc.	36.70	40,366.03
05-19-03	05-22-03	1,500	Biogen, Inc.	39.43	59,141.92
12-16-03	12-19-03	1,000	Bristol Myers Squibb	26.59	26,594.35
06-17-03	06-20-03	30	Citigroup	45.30	1,358.98
06-17-03	06-20-03	270	Citigroup	45.30	12,230.78
06-11-03	06-16-03	250	Coca-Cola	45.95	11,486.96
06-17-03	06-20-03	1,250	Coca-Cola	47.99	59,984.68
09-30-03	10-03-03	750	Diamonds Trust Series I	92.48	69,356.75

Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
09-30-03	10-03-03	750	Diamonds Trust Series I	92.48	69,356.75
09-24-03	09-29-03	1,000	E.I. du Pont Nemours & Co.	40.08	40,081.42
11-03-03	11-06-03	1,000	E.I. du Pont Nemours & Co.	40.15	40,145.41
06-16-03	06-19-03	40	Emerson Electric	53.03	2,121.10
06-16-03	06-19-03	285	Emerson Electric	53.03	15,112.84
06-16-03	06-19-03	375	Emerson Electric	53.03	19,885.32
06-16-03	06-19-03	300	Emerson Electric	53.03	15,908.25
08-11-03	08-14-03	350	Estee Lauder	37.64	13,172.38
12-18-03	12-23-03	500	Estee Lauder	37.90	18,949.11
03-31-03	04-03-03	1,000	ExxonMobil	34.93	34,929.11
04-24-03	04-28-03	50,000	Fayetteville, AR Schools NR (C 10-1-03 @ 100, continuously callable) 4.100% Due 06-01-04	99.90	49,950.00
07-10-03	07-15-03	50,000	Fayetteville, AR Schools NR (C 10-1-03 @ 100, continuously callable) 4.100% Due 06-01-04	100.00	50,000.00
04-15-03	04-16-03	100,000	Federal Farm Credit Bank (NC) 6.400% Due 10-20-03	102.29	102,286.00
07-07-03	07-08-03	50,000	Federal Farm Credit Bank (NC) 6.400% Due 10-20-03	101.25	50,625.15
09-23-03	09-24-03	75,000	Federal Home Loan Bank (C 2-13-04 @100, continuously thereafter) 6.350% Due 02-13-12	101.50	76,125.00
09-26-03	09-29-03	25,000	Federal Home Loan Bank (C 2-13-04 @100, continuously thereafter) 6.350% Due 02-13-12	101.25	25,312.50
08-26-03	08-27-03	100,000	Federal Home Loan Bank (C 2-6-04 @100, continuously thereafter) 6.200% Due 02-06-12	101.10	101,100.00
08-28-03	08-29-03	100,000	Federal Home Loan Bank (C 2-6-04 @100, continuously thereafter) 6.200% Due 02-06-12	101.52	101,525.00
09-12-03	09-15-03	100,000	Federal Home Loan Bank (C 2-6-04 @100, continuously thereafter) 6.200% Due 02-06-12	101.34	101,343.75
03-10-03	03-13-03	1,000	Federal National Mortgage Assn.	59.63	59,628.20
07-31-03	08-05-03	1,500	Flextronics	11.17	16,756.46
06-04-03	06-09-03	300	Genentech Inc.	68.08	20,424.04
06-20-03	06-25-03	200	Genentech Inc.	54.97	10,994.84
06-20-03	06-25-03	1,500	Genentech Inc.	54.97	82,461.33
05-15-03	05-20-03	500	General Dynamics	64.67	32,336.68
05-16-03	05-21-03	150	General Dynamics	64.72	9,707.54
05-16-03	05-21-03	350	General Dynamics	64.72	22,650.94
06-12-03	06-17-03	500	General Dynamics	73.46	36,728.27

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
10-14-03	10-17-03	1,000	General Electric	29.14	29,138.63
10-14-03	10-17-03	1,000	General Electric	29.14	29,138.63
06-24-03	06-27-03	275	Harley Davidson	40.39	11,106.42
06-24-03	06-27-03	175	Harley Davidson	40.39	7,067.72
06-25-03	06-30-03	1,200	Harley Davidson	40.01	48,012.02
07-28-03	07-31-03	70	Intel Corp	24.66	1,726.12
07-28-03	07-31-03	130	Intel Corp	24.66	3,205.64
11-19-03	11-24-03	350	International Paper Co.	36.93	12,925.59
11-19-03	11-24-03	2,250	International Paper Co.	36.93	83,093.10
03-07-03	03-10-03	591.0170	Invesco Telecommunications	7.78	4,598.11
11-17-03	11-20-03	1,000.0000	Japan Webs	8.63	8,629.59
08-14-03	08-19-03	1,500	Johnson & Johnson	51.04	76,558.36
01-15-03	01-21-03	600	KLA Tencor Corp	38.25	22,949.96
01-15-03	01-21-03	350	KLA Tencor Corp	38.25	13,387.48
01-15-03	01-21-03	50	KLA Tencor Corp	38.25	1,912.50
01-21-03	01-24-03	1,200	KLA Tencor Corp	35.86	43,036.82
01-29-03	02-03-03	1,000	Kraft Foods Inc.	31.70	31,698.24
01-29-03	02-03-03	500	Kraft Foods Inc.	31.70	15,849.12
04-07-03	04-10-03	500	Kraft Foods Inc.	29.08	14,539.32
04-07-03	04-10-03	1,000	Kraft Foods Inc.	29.08	29,078.63
12-19-03	12-24-03	500	Limited	17.68	8,839.58
12-19-03	12-24-03	500	Limited	17.68	8,839.58
12-23-03	12-29-03	750	Limited	17.82	13,364.37
12-26-03	12-31-03	1,250	Limited	17.92	22,403.07
04-01-03	04-04-03	500	Lincoln National Corporation	24.93	12,467.39
04-04-03	04-09-03	1,000	Lincoln National Corporation	24.96	24,964.77
01-09-03	01-14-03	535	Lockheed-Martin Corp.	54.39	29,097.77
01-17-03	01-23-03	1,900	Lockheed-Martin Corp.	52.93	100,563.96
01-03-03	01-08-03	225	Lowe's	36.31	8,169.50
01-03-03	01-08-03	250	Lowe's	36.31	9,077.23
01-03-03	01-08-03	1,500	Lowe's	36.31	54,463.35
05-13-03	05-16-03	2,400	MBNA Corp.	19.70	47,271.30
05-13-03	05-16-03	600	MBNA Corp.	19.70	11,817.82
05-13-03	05-16-03	500	MBNA Corp.	19.70	9,848.19
05-13-03	05-16-03	820	MBNA Corp.	19.70	16,151.03
04-17-03	04-23-03	1,200	Merck	52.68	63,211.20
04-17-03	04-23-03	50	Merck	54.80	2,739.87
03-07-03	03-12-03	100.0000	Merrill Lynch Internet HOLDRS	26.04	2,603.92
06-12-03	06-17-03	500	Microsoft Corp.	24.89	12,444.41
10-27-03	10-30-03	750	Microsoft Corp.	27.01	20,256.54
12-16-03	12-19-03	500	Microsoft Corp.	26.93	13,464.36
10-15-03	10-20-03	500	Minnesota Mining & Mfg.	74.01	37,003.71
10-15-03	10-20-03	500	Minnesota Mining & Mfg.	74.01	37,003.72
01-28-03	01-31-03	2,500	NASDAQ 100 Index	24.51	61,273.14
01-28-03	01-31-03	500	NASDAQ 100 Index	24.51	12,254.63

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
01-31-03	02-05-03	500	NASDAQ 100 Index	24.26	12,132.13
01-31-03	02-05-03	1,500	NASDAQ 100 Index	24.26	36,396.40
07-09-03	07-14-03	1,600	NASDAQ 100 Index	32.16	51,451.50
07-11-03	07-16-03	1,400	NASDAQ 100 Index	31.58	44,209.92
07-16-03	07-21-03	2,000	NASDAQ 100 Index	32.20	64,396.97
07-31-03	08-05-03	375	Newell Co Inc	25.24	9,463.84
07-31-03	08-05-03	985	Newell Co Inc	25.24	24,858.36
07-31-03	08-05-03	1,000	Newell Co Inc	25.24	25,236.91
07-31-03	08-05-03	250	Newell Co Inc	25.24	6,309.23
07-31-03	08-05-03	515	Newell Co Inc	25.24	12,997.01
07-25-03	07-30-03	1,650	Oracle Systems	11.64	19,200.97
07-25-03	07-30-03	1,350	Oracle Systems	11.64	15,709.88
07-28-03	07-31-03	2,650	Oracle Systems	11.82	31,329.21
07-28-03	07-31-03	350	Oracle Systems	11.82	4,137.82
10-09-03	10-15-03	700	Pfizer	30.86	21,600.98
10-09-03	10-15-03	800	Pfizer	30.86	24,686.84
10-09-03	10-15-03	250	Pfizer	30.86	7,714.64
03-04-03	03-07-03	150	Polycom Inc.	9.86	1,478.95
10-30-03	11-04-03	500	Qualcomm Incorporated	47.72	23,861.23
03-24-03	03-25-03	3,731.3430	Rydex Series Trust URSA Fund	12.82	47,835.82
03-24-03	03-25-03	4,068.9690	Rydex Series Trust URSA Fund	12.82	52,164.18
03-25-03	03-26-03	5,924.1710	Rydex Series Trust URSA Fund	12.66	75,000.00
04-01-03	04-02-03	9,015.0000	Rydex Series Trust URSA Fund	12.88	116,113.20
12-02-03	12-03-03	75.8290	Rydex Series Trust URSA Fund	10.16	770.42
12-02-03	12-03-03	9,922.5560	Rydex Series Trust URSA Fund	10.16	100,813.18
05-14-03	05-19-03	750	S&P Midcap 400 Depository Receipt	83.14	62,352.07
05-16-03	05-21-03	250	S&P Midcap 400 Depository Receipt	82.80	20,699.02
06-25-03	06-30-03	600	S&P Midcap 400 Depository Receipt	88.48	53,085.51
06-25-03	06-30-03	400	S&P Midcap 400 Depository Receipt	88.48	35,390.34
06-25-03	06-30-03	1,000	S&P Midcap 400 Depository Receipt	88.48	88,475.86
11-18-03	11-21-03	1,000	Schwab Corporation	11.58	11,583.05
12-01-03	12-04-03	2,000	Schwab Corporation	11.63	23,258.90
01-06-03	01-09-03	200	Standard & Poors Depository Receipts	92.94	18,587.40
01-06-03	01-09-03	700	Standard & Poors Depository Receipts	92.94	65,055.90
01-28-03	01-31-03	250	Standard & Poors Depository Receipts	85.17	21,291.85
02-03-03	02-06-03	240	Standard & Poors Depository Receipts	86.32	20,717.61
02-03-03	02-06-03	510	Standard & Poors Depository Receipts	86.32	44,024.93
02-04-03	02-07-03	190	Standard & Poors Depository Receipts	84.49	16,052.73
02-04-03	02-07-03	810	Standard & Poors Depository Receipts	84.49	68,435.32
05-14-03	05-19-03	275	Standard & Poors Depository Receipts	94.53	25,996.15
05-14-03	05-19-03	225	Standard & Poors Depository Receipts	94.53	21,269.58
05-15-03	05-20-03	500	Standard & Poors Depository Receipts	94.84	47,421.62
05-16-03	05-21-03	1,000	Standard & Poors Depository Receipts	94.47	94,466.77
07-11-03	07-16-03	750	Standard & Poors Depository Receipts	99.94	74,956.81
07-22-03	07-25-03	250	Standard & Poors Depository Receipts	99.16	24,788.83

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
07-25-03	07-30-03	750	Standard & Poors Depository Receipts	98.93	74,194.02
04-17-03	04-23-03	600	Starbucks Corp.	22.51	13,505.95
04-29-03	05-02-03	500	Sun Communities, Inc.	38.62	19,309.19
11-10-03	11-14-03	350	SunTrust Banks Inc.	68.35	23,923.99
11-10-03	11-14-03	100	SunTrust Banks Inc.	68.35	6,835.43
11-26-03	12-02-03	250	SunTrust Banks Inc.	69.96	17,489.19
11-26-03	12-02-03	950	SunTrust Banks Inc.	69.96	66,458.90
11-26-03	12-02-03	50	SunTrust Banks Inc.	69.99	3,499.33
01-09-03	01-14-03	1,000	Sungard Data Systems	23.58	23,581.28
01-10-03	01-15-03	1,000	Sungard Data Systems	23.61	23,609.28
05-01-03	05-02-03	100,000	U. S. Treasury Note 5.000% Due 02-15-11	110.12	110,125.00
04-02-03	04-07-03	300	Walmart Stores	53.96	16,187.24
12-16-03	12-19-03	450	Walmart Stores	51.35	23,105.91
07-30-03	08-04-03	2,000	Washington Mutual Inc.	40.55	81,101.79
07-01-03	07-07-03	100	WebEx Communications Inc.	13.61	1,360.93
07-29-03	08-01-03	350	Werner Enterprises	23.92	8,370.67
07-31-03	08-05-03	1,000	Werner Enterprises	23.84	23,836.18
07-31-03	08-05-03	1,000	Werner Enterprises	23.84	23,836.18
12-26-03	12-31-03	350	Williams Sonoma	33.99	11,895.94
12-26-03	12-31-03	500	Williams Sonoma	33.99	16,994.20
07-01-03	07-07-03	180	Yahoo! Inc.	32.47	5,844.32
08-15-03	08-20-03	1,000.0000	iShares Lehman 20+ Year T-Bond Fund	82.33	82,326.14
08-19-03	08-22-03	300.0000	iShares Lehman 20+ Year T-Bond Fund	82.85	24,853.83
08-20-03	08-25-03	400.0000	iShares Lehman 20+ Year T-Bond Fund	82.87	33,148.44
08-26-03	08-29-03	300.0000	iShares Lehman 20+ Year T-Bond Fund	83.06	24,916.83
09-25-03	09-30-03	500.0000	iShares Lehman 20+ Year T-Bond Fund	86.53	43,262.97
09-26-03	10-01-03	500.0000	iShares Lehman 20+ Year T-Bond Fund	86.94	43,467.96
					5,662,946.34
SHORT SALES					
02-07-03	02-10-03	12	Bank of America February 70 Calls	0 96	1,149.96
03-07-03	03-10-03	30	Dell April 25 Calls	2.07	6,214.81
03-25-03	03-26-03	30	Dell April 27 1/2 Calls	1.47	4,409.88
02-14-03	02-18-03	30	Dell March 22 1/2 Calls	3.06	9,190.32
02-10-03	02-11-03	10	Federal Nat'l Mortgage February 60 Calls	3.64	3,635.28
02-24-03	02-25-03	10	Federal Nat'l Mortgage March 60 Calls	4.43	4,428.86
05-19-03	05-20-03	20	Genentech June 50 Calls	5.05	10,093.12
01-22-03	01-23-03	10	General Dynamics February 70 Calls	1.25	1,249.96
03-12-03	03-13-03	15	Lincoln National Corp. April 20 Calls	5.04	7,553.56
02-24-03	02-25-03	15	Lincoln National Corp. March 25 Calls	3.15	4,726.45
03-13-03	03-14-03	12	Merck April 50 Calls	2.75	3,298.01
01-23-03	01-24-03	12	Merck February 55 Calls	1.95	2,343.32

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
02-27-03	02-28-03	12	Merck March 50 Calls	3.64	4,369.34
11-05-03	11-06-03	10	Minnesota Mining & Mfg. Jan 72 1/2 Calls	7.60	7,603.03
02-20-03	02-21-03	20	S&P Midcap 400 DR March 74 Calls	2.36	4,726.45
03-10-03	03-11-03	30	Starbucks April 17 1/2 Calls	5.05	15,157.23
11-19-03	11-20-03	12	SunTrust Banks Inc. January 65 Calls	5.03	6,035.75
03-10-03	03-11-03	20	Wal-Mart April 45 Calls	3.45	6,908.78
02-27-03	02-28-03	20	Wal-Mart March 45 Calls	3.55	7,107.18
					110,201.29
SHORT COVERS					
02-21-03	02-26-03	12	Bank of America February 70 Calls	0.96	1,149.96
03-25-03	03-26-03	30	Dell April 25 Calls	3.74	11,212.70
04-02-03	04-03-03	30	Dell April 27 1/2 Calls	1.17	3,512.60
03-07-03	03-10-03	30	Dell March 22 1/2 Calls	3.84	11,514.00
02-21-03	02-24-03	10	Federal Nat'l Mortgage February 60 Calls	4.77	4,772.60
03-10-03	03-11-03	10	Federal Nat'l Mortgage March 60 Calls	1.55	1,550.00
06-04-03	06-05-03	3	Genentech June 50 Calls	19.75	5,925.00
06-20-03	06-25-03	17	Genentech June 50 Calls	5.05	8,579.15
02-21-03	02-21-03	10	General Dynamics February 70 Calls	0.00	0.00
04-01-03	04-04-03	5	Lincoln National Corp. April 20 Calls	5.04	2,517.86
04-04-03	04-09-03	10	Lincoln National Corp. April 20 Calls	5.04	5,035.71
03-12-03	03-13-03	15	Lincoln National Corp. March 25 Calls	0.93	1,400.00
04-17-03	04-23-03	12	Merck April 50 Calls	2.75	3,298.01
02-21-03	02-21-03	12	Merck February 55 Calls	0.00	0.00
03-13-03	03-14-03	12	Merck March 50 Calls	1.74	2,093.36
03-18-03	03-19-03	20	S&P Midcap 400 DR March 74 Calls	1.58	3,159.80
04-14-03	04-15-03	24	Starbucks April 17 1/2 Calls	8.67	20,819.48
04-17-03	04-23-03	6	Starbucks April 17 1/2 Calls	5.05	3,031.45
11-26-03	11-28-03	12	SunTrust Banks Inc. January 65 Calls	5.03	6,035.75
04-02-03	04-03-03	20	Wal-Mart April 45 Calls	9.28	18,563.80
03-10-03	03-11-03	20	Wal-Mart March 45 Calls	3.14	6,284.60
					120,455.83
ADJUST CAPITAL					
01-10-03	01-10-03	1,500	Pan Pacific Retail	0.15	229.99
05-21-03	05-21-03	1,500	Pan Pacific Retail	0.16	234.59
05-21-03	05-21-03	400	Pan Pacific Retail	0.16	62.56
05-21-03	05-21-03	600	Pan Pacific Retail	0.16	93.83
08-27-03	08-27-03	1,500	Pan Pacific Retail	0.16	234.59
08-27-03	08-27-03	400	Pan Pacific Retail	0.16	62.56
08-27-03	08-27-03	600	Pan Pacific Retail	0.16	93.83
11-25-03	11-25-03	1,500	Pan Pacific Retail	0.16	234.59

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Longer Investments Inc.

PURCHASE AND SALE

J. Christopher Chocola

From 01-01-03 To 12-31-03

Trade Date	Settle Date	Quantity	Security	Unit Price	Amount
11-25-03	11-25-03	400	Pan Pacific Retail	0.16	62.56
11-25-03	11-25-03	600	Pan Pacific Retail	0.16	93.83
08-27-03	09-26-03	2,150	Qualcomm Incorporated	0.07	150.50
08-27-03	09-26-03	600	Qualcomm Incorporated	0.07	42.00
01-09-03	01-09-03	2,000	Sun Communities, Inc.	0.42	845.70
04-09-03	04-09-03	2,000	Sun Communities, Inc.	0.44	889.44
07-09-03	07-09-03	1,500	Sun Communities, Inc.	0.44	667.08
10-08-03	10-08-03	1,500	Sun Communities, Inc.	0.44	667.08
					4,664.73

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X					
	GMAC	Car loan	X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Business Roundtable	May 1-2	Wash DC - New York - Southbend	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Oaklawn Psychiatric Center
President	Drive Capital, Inc.
Director	WNIT Public Television
Director	St Joseph County Red Cross
Board of Advisors	South Bend Center for the Homeless

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

HAND DELIVERED

(8)

LEGISLATIVE RESOURCE CENTER

2004 MAY 13 AM 11:44

OFFICE OF THE CLERK

U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

DONNA M. CHRISTENSEN

(Full Name)

1510 LONGWORTH HOUSE OFFICE BUILDING

(Mailing Address)

WASHINGTON, DC 20515

Daytime Telephone: 202-225-1790

Filer Status	[X] Member of the U.S. House of Representatives	State: VIRGIN ISLANDS District: AT LARGE	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-11-2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ARMED FORCES RETIREMENT PENSION	SPOUSE	N/A
	SURVIVOR BENEFITS	SPOUSE	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name	DONNA M. CHRISTENSEN	Page 3 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
PARTNERSHIP FOR SIGHT	SPEECH	AUGUST 4.2003	$2,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	Value of Asset	Type of Income	Amount of Income	Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock	X	X	X	P
	Simon & Schuster	Indefinite	Royalties	X	
	1st Bank of Paducah, KY accounts	X	X	X	
	OFFICE BUILDING 102 EST. RICHMOND, V.I.	✓	✓	✓	
	THREE BEDROOM CONDO EST. QUESTA VERDE, V.I.	✓	✓	✓	
	.197 ACRE 40ED EST LA GRANGE, V.I.			✓	

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name DONNA M. CHRISTENSEN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
	NONE														

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	V.I. COMMUNITY BANK, VIRGIN ISLANDS	MORTGAGE: 102 EST. RICHMOND U.S. VIRGIN ISLANDS		✓			
	V.I.COMMUNITY BANK, VIRGIN ISLANDS	BUSINESS LOAN	✓				
	FIRST BANK, VIRGIN ISLANDS	MORTGAGE: VIRGIN ISLANDS #E31 EST. QUESTA VERDE	✓				
	U.S. TREASURY	TAXES	✓				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
HARVARD UNIVERSITY: RFK MEMORIAL CENTER	JAN 23-24	MIAMI-HAITI-MIAMI-ST.CROIX	Y	Y	N	N
THE PUBLIC GOVERANCE INSTITUTE	FEB 28 TO MARCH 2	WASHINGTON DC TO WEST VA	Y	Y	Y	N
THE FAITH & POLITICS INSTITUTE	MARCH 3-9	WASHINGTON DC TO ALABAMA	Y	Y	Y	Y
DOMINICAN AMERICAN NATIONAL ROUNDTABLE	APRIL 23-27	ST.CROIX-SAN JUAN-DOMINICAN REPUBLIC-STX	Y	Y	Y	N
ASSOC. OF STATE & TERRITORIAL DIR. OF HEALTH PROMOTION & EDUCATION	MAY21-22	BALTIMORE-SAN DIEGO-BALTIMORE	Y	N	N	N
NATIONAL BLACK LEADERSHIP COMM. ON AIDS	JUNE 11-12	DCA-NEW YORK-DCA	Y	N	N	N
ST.GEORGES UNIVERSITY	JUNE 16	DCA-NEW YORK-DCA	N	N	N	N
SUNY DOWNSTATE MEDICAL CENTER	JUNE 23	DCA-NEW YORK-DCA	N	N	N	N
NATIONAL URBAN LEAGUE	JULY 28-29	DCA-PITTSBURG-DCA	Y	N	N	N
ASSOCIATION OF BLACK CARDIOLOGISTS	AUGUST 3	DCA-PHILADELPHIA-DCA	Y	N	N	N
PARTNERSHIP FOR SIGHT	AUGUST 4-6	DCA-PHILADELPHIA-ST.CROIX	Y	N	N	N
CONGRESSIONAL BLACK CAUCUS	OCTOBER 24-26	STX-PUERTO RICO-STX	Y	Y	N	N
MOREHOUSE SCHOOL OF MEDICINE	OCTOBER 30-31	DCA-ATLANTA-ST.THOMAS	Y	N	N	N
CARIB NEWS	NOV 6-9	DCA-BAHAMAS-ST.CROIX	Y	N	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

DONNA M. CHRISTENSEN
DELEGATE, VIRGIN ISLANDS

COMMITTEE ON RESOURCES
RANKING MEMBER, SUBCOMMITTEE ON NATIONAL PARKS, RECREATION AND PUBLIC LANDS

COMMITTEE ON SMALL BUSINESS
MEMBER, SUBCOMMITTEE ON REGULATORY REFORM AND OVERSIGHT
MEMBER, SUBCOMMITTEE ON RURAL ENTERPRISES, AGRICULTURE AND TECHNOLOGY

SELECT COMMITTEE ON HOMELAND SECURITY
MEMBER, SUBCOMMITTEE ON EMERGENCY PREPAREDNESS AND RESPONSE
MEMBER, SUBCOMMITTEE ON CYBERSECURITY, SCIENCE, AND RESEARCH AND DEVELOPMENT

MEMBER, CONGRESSIONAL BLACK CAUCUS
MEMBER, CONGRESSIONAL CAUCUS FOR WOMEN'S ISSUES
MEMBER, CONGRESSIONAL TRAVEL AND TOURISM CAUCUS

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515–5501

PLEASE RESPOND TO

☐ WASHINGTON OFFICE
1510 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-1790
FAX (202) 225-5517

DISTRICT OFFICES

☐ SPACE NO. 25
SUNNY ISLE SHOPPING CENTER
P.O. BOX 5980
ST. CROIX, VIRGIN ISLANDS 00823
(340) 778-5900
FAX (340) 778-5111

☐ SUITE NO. 207
NISKY CENTER, 2ND FLOOR
ST. THOMAS, VIRGIN ISLANDS 00802
(340) 774-4408
FAX (340) 774-8033

☐ #109 CONTANT ENIGHED
CRUZ BAY, ST. JOHN
U.S. VIRGIN ISLANDS 00831
(340) 776-1212

MC

May 19, 2004

Honorable Jeff Trandahl
The Office of the Clerk
H154, The Capitol
U.S. House of Representatives
Washington, D.C. 20515

Dear Mr. Trandahl,

Please accept this amendment to my Ethics filing for FY 2003. I inadvertently did not list the value of a piece of property that I own. That property, .197 acre of 40ED La Grange, Frederiksted, St. Croix should be listed at approximately between $1,000 and $15,000 in value. As it is undeveloped, I received no income from it.

Enclosed is a corrected worksheet. Thank you for your consideration.

Sincerely,

Donna M. Christensen
Member of Congress

DCC/mcw

2004 MAY 19 PM 12:03
U.S. HOUSE OF REPRESENTATIVES

PRINTED ON RECYCLED PAPER

Name DONNA M. CHRISTENSEN | Page 4 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source	Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp. Stock	E	DIVIDENDS	VI	P
	Simon & Schuster	Indefinite	INTEREST; Royalties	IV	
	1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	OFFICE BUILDING 102 EST. RICHMOND, V.I.	F	INTEREST	VII	
	THREE BEDROOM CONDO EST. QUESTA VERDE, V.I.	D	DIVIDENDS	V	
	.197 ACRES 40ED EST. LA GRANGE, V.I.	B		I	

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 17 PM 12:08

(Office Use Only)

Rep. Wm. Lacy Clay
(Full Name)

6251 San Bonita Avenue St. Louis,, MO 63105
(Mailing Address)

202-225-2406
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: MO District: 01	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wm Lacy Clay	05-13-04

815

SCHEDULE I - EARNED INCOME

Name Rep. Wm. Lacy Clay

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
St. Louis Development Corporation	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rep. Wm. Lacy Clay

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	State of MO Deferred Compensation Plan	$1,001 - $15,000		NONE	
SP	St. Louis Dev. Corp. Employee Retirement Plan (General American)	$15,001 - $50,000		NA	
SP	First Community Credit Union	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Rep. Wm. Lacy Clay

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
CBC Foundation, Inc.	Mar. 26-31	Wash., D.C.--Orlando, Fla.--Wash., D.C.	Y	N	N	1 day
Nat'l. Foundation for Women Legislators, Inc.	Aug. 29-31	St. Louis--Las Vegas--St. Louis	Y	N	N	N/A

SCHEDULE VIII - POSITIONS

Name Rep. Wm. Lacy Clay

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	William L. Clay Scholarship and Research Fund
Director	Congressional Black Caucus Foundation, Inc.

SCHEDULE IX - AGREEMENTS

Name Rep. Wm. Lacy Clay

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2/5/02	William Lacy Clay and Jeff Eisenberg and Associates	Affiliation is for the sole purpose of maintaining real estate license; no compensation is received and name is not used on letterhead or other materials

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 3:54
(Office Use Only)
MC

James E. Clyburn
(Full Name)

1703 Gervais Street Columbia, SC 29201
(Mailing Address)

803-799-1100
Daytime Telephone

Filer Status ✓ Member of the U.S. House of Representatives — State: SC District: 6th — Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	**Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?**	Yes ☐ No ☑
Exemptions--	**Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependant child because they meet all three tests for exemption?**	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James E. Clyburn	May 14, 2004

SCHEDULE I - EARNED INCOME

Name James E Clyburn

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
South Carolina Retirement System (This income is not subject to the outside earned income limit)	Retirement from the State of South Carolina	$49,920
U.S. Department of Veterans Affairs	Retirement Income	N/A

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name James E. Clyburn

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Most Worshipful Prince Hall Grand Lodge of F. And A. Masons of the State of South Carolina	Speech	May 8, 2003	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James E. Clyburn

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Fort Jackson Federal Credit Union	$1 - $1,000	INTEREST	$1 - $200	
	South Carolina State Credit Union	$1 - $1,000	INTEREST	$1 - $200	
	Bank of America	$1 - $1,000	INTEREST	$1 - $200	
	SCANA Corporation	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
	Automated Data Processing	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Bank of America	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James E. Clyburn

	645-47 W. Liberty Street Sumter, SC (50% ownership)	$50,001 - $100,000	RENT	$2,501 - $5,000	
	Bank of America	$15,001 - $50,000	IRA	NONE	
	Merrill Lynch, Columbia, SC	$15,001 - $50,000	IRA	NONE	
	Wright-Patman Congressional Federal Credit Union	$1 - $1,000	INTEREST	$1 - $200	
	Investment Entrepreneurs, LLC (10% Investment) Commerce Business Plaza Conway, S.C.	$100,001 - $250,000	Other: (Please specify) None	NONE	

SCHEDULE V - LIABILITIES

Name James E. Clyburn

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Countrywide Funding, Van Nuys, CA	609 Santee Drive Santee, S.C.	$100,001 - $250,000
	NBSC Columbia, S.C.	Mortgage on 645-47 Liberty St., Sumter, S.C. (50% interest)	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name James E. Clyburn

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Assoc of American Railroads	Jan. 17-20	Columbia, S.C.--Ft. Lauderdale, FL--Columbia, SC	Y	Y	Y	N/A
Congressional Black Foundation	March 28-29	Columbia, S.C.--Orlando, FL--Columbia, S.C.	Y	N	N	N/A
Delta Sigma Theta Sorority	May 31	Columbia, S.C.--Detroit, MI--Columbia, SC	N	Y	N	N/A
Democratic Leadership Council	Sept. 12-14	Washington, D.C.--Mackinac Island, MI--Washington, D.C.	Y	Y	N	N/A
Business Gov't Relations Council	Oct. 18-19	Washington, D.C.--Lewisburg, WV--Washington, D.C.	Y	Y	Y	N/A
U.S.-Asia Foundation	Oct. 23-27	Columbia, S.C.--Shijiazhuang, China--Columbia, S.C.	Y	Y	Y	N/A
CaribNews	Nov. 7-9	Washington, D.C.--Nassau, Bahamas--Washington, D.C.	Y	Y	Y	N/A
Nuclear Energy Institute	June 28-July 3	Columbia, S.C.--Barcelona, Spain--Columbia, S.C.	Y	Y	Y	N/A
Congressional Black Caucus Political & Education Inst.	June 5-8	Washington, D.C.--Charleston--Washington, D.C.	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name James E. Clyburn

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Allen University
Trustee	Brookgreen Gardens
Board Member	CBC PAC
Board Member	CBC Political Education & Leadership Institute
Board Member	Palmetto Conservation Foundation
Board Member	International African American Museum

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:22
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U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

John Howard Coble
(Full Name)

5741-L Bramblegate Road Greensboro, NC 27409
(Mailing Address)

202.225.3065
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives — State: NC District: 06 — ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Howard Coble	5-17-04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Howard Coble

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Time-Warner Common Stock	$1 - $1,000	DIVIDENDS	NONE	
BB&T Balanced Mutual Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
BB&T Growth & Income Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
BB&T Mid Cap Growth Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
BB&T Mid Cap Value B Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
BB&T NC Intermediate Tax Free Investment Fund	$1,001 - $15,000	DIVIDENDS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Howard Coble

BB&T Bank Savings Account	$15,001 - $50,000	INTEREST	$201 - $1,000	S
Wright Patman FCU Savings Account	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
Wachovia Cap Asset Management Account	$15,001 - $50,000	DIVIDENDS	$1 - $200	PS
Federated Bond Fund (First Citizens)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
Federated Large Cap Growth Fund (First Citizens)	$1,001 - $15,000	DIVIDENDS	NONE	PS
Federated American Leaders Fund (First Citizens)	$1,001 - $15,000	DIVIDENDS	NONE	PS
Bank of America Checking Account	$1,001 - $15,000	DIVIDENDS	NONE	
Bank of North Carolina Stock	$1,001 - $15,000	DIVIDENDS	NONE	
Jefferson-Pilot Insurance Fixed Annuity	$1,001 - $15,000	DIVIDENDS	NONE	
Jefferson-Pilot Insurance Variable Annuity #1	$1,001 - $15,000	DIVIDENDS	NONE	
Jefferson-Pilot Insurance Variable Annuity #2	$15,001 - $50,000	DIVIDENDS	NONE	
Allmerica Insurance Annuity	$15,001 - $50,000	DIVIDENDS	NONE	
MassMutual Insurance Annuity #1	$15,001 - $50,000	DIVIDENDS	NONE	
MassMutual Insurance Annuity #2	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Howard Coble

	Phoenix Home Insurance Annuity	$15,001 - $50,000	DIVIDENDS	NONE	
	State Employees Credit Union Savings Account	$1,001 - $15,000	INTEREST	$1 - $200	
	Merrill Lynch Cash Management Account	$100,001 - $250,000	INTEREST/DIVIDENDS	$201 - $1,000	PS
	Merrill Lynch IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	PS
	78 acre farm, Henry County, Virginia	$50,001 - $100,000	n/a	n/a	
	House, Watauga County, North Carolina	$100,001 - $250,000	n/a	n/a	
	Lexington State Bank Stock	$1,001 - $15,000	INTEREST	$1 - $200	
	Sterling South Bank Stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Van Kampen Enterprise Fund	$1,001 - $15,000	DIVIDENDS	NONE	
	Van Kampen Emerging Growth Fund	$1,001 - $15,000	DIVIDENDS	NONE	
	New World Mutual Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Washington Mutual Investors Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	High Country Bank Stock	$1,001 - $15,000	DIVIDENDS	NONE	
	TransAmerica Life Insurance Non-Qualified Annuity #1	$1,001 - $15,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John Howard Coble

	TransAmerica Life Insurance Non-Qualified Annuity #2	$1 - $1,000	DIVIDENDS	NONE	
	Dreyfuss Premier Worldwide Growth Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Cienna Common Stock	$1 - $1,000	DIVIDENDS	NONE	

SCHEDULE IV - TRANSACTIONS

Name John Howard Coble

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	BB&T Balanced Mutual Fund (see attached)	S	12-04-03	$15,001 - $50,000
	BB&T NC Int Tax Free Investment (see attached)	P	12-04-03	$1,001 - $15,000
	Merrill Lynch Cash Management Account (see attached)	PS	various	various
	Merrill Lynch IRA (see attached)	PS	various	various
	Wachovia Cap Asset Management Account (see attached)	PS	various	various
	Federated Bond Fund (see attached)	PS	various	various
	Federated Large Cap Growth Fund (see attached)	PS	various	various
	Federated American Leaders Fund (see attached)	PS	various	various
	BB&T Bank Savings Account	S	12-04-0	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John Howard Coble

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Management and Development Institute	Feb. 19-24	Wash., DC-Cologne, Germany - Liechtenstein - Wash.,DC	Y	Y	N	n/a
International Management and Development Institute	Apr. 21-27	Wash.,DC - Helsinki, Finland - Copenhagen, Denmark - Oslo, Norway - Wash.,DC	Y	Y	N	n/a
Kessler& Associates	Aug. 3-9	Greensboro, NC - County Mayo, Ireland - London, England	Y	Y	N	n/a
Ripon Educational Fund	Aug. 10-13	County Mayo, Ireland - London, England - Greensboro, NC	Y	Y	N	1 day
3M, Inc.	Dec. 12	Winston-Salem, NC - St. Paul, MN - Winston-Salem, NC	N	Y	Y	n/a

SCHEDULE VIII - POSITIONS

Name John Howard Coble

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Board of Visitors	Guilford College, Greensboro, NC
Member, Congressional Advisory Board	Greensboro College, Greensboro, NC
Member, Board of Visitors	U.S. Coast Guard Academy, New London, CT
Member, Congressional Advisory Board	DECA, An Association of Marketing Students, Reston, VA
Member, Board of Advisors	LeadAmerica Foundation, Washington, DC
Member, Congresional Advisory Board	American Conservative Union, Alexandria, VA

BB&T PRIVATE BANKING

05/17 '04 11:14 NO.761 02/04

BB&T Funds
PO Box 182533
Columbus OH 43218-2533

BB&T Funds
Sensible Investing for Generations™

4398

JOHN HOWARD COBLE
2102 N ELM ST
SUITE B
GREENSBORO NC 27408

Account Statement

January 2, 2003 through December 31, 2003

Dealer Number: 7500
Branch Number: 482
Rep. Number: 482
Rep. Name: JAMIE GILLESPIE.

Dealer Address
BB&T INVESTMENT SERVICES
200 SOUTH COLLEGE STREET
CHARLOTTE NC 28202

ACCOUNT INFORMATION: 800-BBT-1872

INTERNET ADDRESS: WWW.BBTFUNDS.COM

Page 1

ACCOUNT SUMMARY

FUND	ACCOUNT NUMBER	SHARE PRICE ON 12/31/03	SHARES OWNED ON 12/31/03	MARKET VALUE ON 12/31/03
LARGE COMPANY VALUE FUND-B SHARES	7534001014	$16.66	3,547.780	$59,106.01
MID CAP VALUE - B	7532104109	$14.41	1,728.059	$24,901.33
MID CAP GROWTH FUND - B SHARES	7532002002	$10.57	2,317.263	$24,493.68
NC INTER TAX-FREE A SHRS	7505009764	$10.74	1,129.360	$12,129.33
BALANCED FUND B SHARES	7536000851	$11.59	0.000	$0.00
TOTAL DOLLAR VALUE				$120,630.35

ASSET ALLOCATION

	MARKET VALUE ON 12/31/03	% OF ALLOCATION*
LARGE COMPANY VALUE FUND-B SHARES	$59,106.01	49.01%
MID CAP VALUE - B	$24,901.33	20.64%
MID CAP GROWTH FUND - B SHARES	$24,493.68	20.30%
NC INTER TAX-FREE A SHRS	$12,129.33	10.05%
BALANCED FUND B SHARES	$0.00	0.00%
TOTAL OF INVESTMENT ACCOUNTS	$120,630.35	100.00%

* ROUNDED TO NEAREST HUNDREDTH

ACCOUNT EARNINGS YEAR-TO-DATE SUMMARY

FUND	FUND NUMBER	ACCOUNT NUMBER	CAPITAL GAINS	DIVIDENDS	TOTAL
LARGE COMPANY VALUE FUND-B SHARES	034	7534001014	$0.00	$434.19	$434.1
MID CAP VALUE - B	321	7532104109	$0.00	$93.52	$93.5
MID CAP GROWTH FUND - B SHARES	320	7532002002	$0.00	$0.00	$0.0
NC INTER TAX-FREE A SHRS	005	7505009764	$0.00	$27.91	$27.9
BALANCED FUND B SHARES	036	7536000851	$0.00	$482.53	$482.5

BB&T PRIVATE BANKING 05/17 '04 11:15 NO.761 03/04

Account Statement
January 2, 2003 through December 31, 2003

JOHN HOWARD COBLE
2102 N ELM ST
SUITE B
GREENSBORO NC 27408

BB&T Funds
Sensible Investing for Generations

FUND	FUND NUMBER	ACCOUNT NUMBER	CAPITAL GAINS	DIVIDENDS	TOTAL

TOTAL EARNINGS YEAR TO DATE $1,038.1

TRANSACTION DETAIL

LARGE COMPANY VALUE FUND-B SHARES

FUND/ACCOUNT NO: 034-7534001014

Trade Date	Transaction		Dollar Amount	Price	Shares	Total Shares
	BALANCE FORWARD					3,517.986
01/31	DIVIDEND REINVE	0.001194	4.20	13.22	0.318	3,518.283
02/28	DIVIDEND REINVE	0.016478	57.97	12.88	4.508	3,522.791
03/31	DIVIDEND REINVE	0.004909	17.23	12.90	1.340	3,524.131
04/30	DIVIDEND REINVE	0.015693	54.85	13.98	3.932	3,528.063
05/30	DIVIDEND REINVE	0.014786	52.17	14.67	3.556	3,531.639
06/30	DIVIDEND REINVE	0.005243	18.52	14.78	1.253	3,532.892
07/31	DIVIDEND REINVE	0.013143	46.43	14.75	3.148	3,536.040
08/29	DIVIDEND REINVE	0.017109	60.50	14.97	4.041	3,540.081
09/30	DIVIDEND REINVE	0.002828	10.01	14.75	0.679	3,540.760
10/31	DIVIDEND REINVE	0.011725	41.62	15.54	2.672	3,543.432
11/28	DIVIDEND REINVE	0.008354	29.60	15.75	1.879	3,545.311
12/31	DIVIDEND REINVE	0.011602	41.13	15.66	2.469	3,547.780
	ENDING BALANCE		$59,108.01	$16.66		3,547.780

ON SELLING YOUR SHARES, YOU MAY PAY A SALES CHARGE. FOR THE CHARGE AND OTHER FEES, SEE THE PROSPECTUS.

MID CAP VALUE - B

FUND/ACCOUNT NO: 321-7532104109

Trade Date	Transaction		Dollar Amount	Price	Shares	Total Shares
	BALANCE FORWARD					400.043
02/28	DIVIDEND REINVE	0.009539	3.82	10.73	0.356	400.399
03/31	DIVIDEND REINVE	0.014960	5.99	10.82	0.554	400.953
05/30	DIVIDEND REINVE	0.002495	1.00	12.41	0.081	401.034
06/30	DIVIDEND REINVE	0.017336	6.95	12.52	0.555	401.589
08/29	DIVIDEND REINVE	0.005440	2.18	12.99	0.168	401.757
09/30	DIVIDEND REINVE	0.013263	5.38	12.91	0.413	402.170
11/28	DIVIDEND REINVE	0.009241	3.72	14.01	0.266	402.436
12/04	EXCH FR 7539000851		18,828.14	14.10	1,321.145	1,723.581
12/31	DIVIDEND REINVE	0.037437	64.53	14.41	4.478	1,728.059

BB&T PRIVATE BANKING 05/17 '04 11:15 NO.761 04/04

Account Statement
January 2, 2003 through December 31, 2003

JOHN HOWARD COBLE
2102 N ELM ST
SUITE B
GREENSBORO NC 27408

BB&T Funds
Sensible Investing for Generations

MID CAP VALUE - B (continued)

FUND/ACCOUNT NO: 321-7532104109

Trade Date	Transaction	Dollar Amount	Price	Shares	Total Shares
	ENDING BALANCE	$24,901.33	$14.41		1,728.069

ON SELLING YOUR SHARES, YOU MAY PAY A SALES CHARGE. FOR THE CHARGE AND OTHER FEES, SEE THE PROSPECTUS.

MID CAP GROWTH FUND - B SHARES

FUND/ACCOUNT NO: 320-7532002002

Trade Date	Transaction	Dollar Amount	Price	Shares	Total Shares
	BALANCE FORWARD				569.910
12/04	EXCH FR 7536000851	18,628.15	10.60	1,757.373	2,317.283
	ENDING BALANCE	$24,483.86	$10.57		2,317.283

ON SELLING YOUR SHARES, YOU MAY PAY A SALES CHARGE. FOR THE CHARGE AND OTHER FEES, SEE THE PROSPECTUS.

NC INTER TAX-FREE A SHRS

FUND/ACCOUNT NO: 005-7505009764

Trade Date	Transaction	Dollar Amount	Price	Shares	Total Shares
	BALANCE FORWARD				0.000
12/04	PURCHASE	12,000.00	10.65	1,126.761	1,126.761
12/31	DIVIDEND REINVESTED	27.91	10.74	2.599	1,129.360
	ENDING BALANCE	$12,129.33	$10.74		1,129.360

BALANCED FUND B SHARES

FUND/ACCOUNT NO: 036-7536000851

Trade Date	Transaction	Dollar Amount	Price	Shares	Total Shares
	BALANCE FORWARD				4,329.540
01/31	DIVIDEND REINVE 0.000884	3.83	9.84	0.389	4,329.929
02/28	DIVIDEND REINVE 0.010257	44.41	9.72	4.569	4,334.498
03/31	DIVIDEND REINVE 0.004792	20.77	9.76	2.128	4,336.626
04/30	DIVIDEND REINVE 0.005127	22.23	10.24	2.171	4,338.797
05/30	DIVIDEND REINVE 0.009546	41.41	10.59	3.910	4,342.707
06/30	DIVIDEND REINVE 0.004730	20.54	10.66	1.927	4,344.634
07/31	DIVIDEND REINVE 0.003715	16.14	10.77	1.499	4,346.133
08/29	DIVIDEND REINVE 0.009884	42.87	10.87	3.944	4,350.077
09/30	DIVIDEND REINVE 0.006554	28.51	10.86	2.625	4,352.702

CMA® ACCOUNT

MR J HOWARD COBLE
2102 N ELM ST
STE B
GREENSBORO NC 27408

Total Account Value As Of 12/31/2003 **$162,578.27**

YOUR FINANCIAL ADVISOR:
ROBERT C KETNER
Robert_Ketner@ml.com
(336) 333-7423

FOR CUSTOMER SERVICE QUESTIONS:
1-800-MERRILL (1-800-637-7455)

Your Merrill Lynch Office:
800 GREEN VALLEY RD. SUITE 400
GREENSBORO NC 27408

Review Your Statement Online at:
www.mlol.ml.com

Monthly Portfolio Summary

Asset	11/28/03 Value	%	12/31/03 Value	%
Cash/Money Accounts	263	*	292	*
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities	84,170	53	84,193	52
Mutual Funds	74,853	47	78,092	48
Options				
Other				
*-Less than 1 %				
Long Market Value	159,287		162,578	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value	159,287		162,578	

Income Summary

	This Statement	Year-to-Date
Tax-Exempt Funds		
Tax-Exempt Interest	.09	3.78
Reportable Interest	294.75	631.94
Reportable Dividends		
Income Not Reported	294.84	635.72
Total		

Items for Attention

Security	Message	Date
	No Items For Attention	

Purchasing Power 111,821 **Loan Value of Securities** 111,529

NEWS

See enclosed newsletter for details on an important change in supplemental coverage that provides your account protection in excess of the amounts afforded by the Securities Investor Protection Corporation.

Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
S&P 500	1111.92	1058.20	879.82
Three-Month Treasury Bills	.92%	.92%	1.19%
Long-Term Treasury Bonds	5.08%	5.13%	4.78%
One-Month LIBOR	1.12%	1.17%	1.38%
NASDAQ	2003.37	1960.26	1335.51

CMA ACCOUNT

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date
Opening Balance Cash & Money Accounts	263.95	
Net Credits & Debits	28.22	1,267.80DR
Closing Balance Cash & Money Accounts	292.17	

Credits	This Statement	Year-to-Date
Sales		6,871.19
Income	294.84	635.72
Funds Received		
Electronic Tfrs		
Other		3,500.00
Total Credits	294.84	11,006.91

Debits	This Statement	Year-to-Date
Purchases		8,376.74
Withdrawals		
Electronic Tfrs		
Interest Charged		6.35
Other	266.62	3,891.62
Total Debits	266.62	12,274.71

Bank Deposit Interest Summary

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield %	Interest on Deposits	Closing Balance
Merrill Lynch Bank USA	248	275	.37	0.09	292
Total ML Bank Deposit Program	248			0.09	292

Realized Capital Gain and Loss Summary*

	This Month	Year-to-Date
Short-Term	.00	.00
Long-Term	.00	(2,907.51)

*Excludes transactions for which we have insufficient data.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 2003 tax return. These reportable transactions will appear on your January statement.

Current Portfolio

Quantity	Security Description	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
Cash and Money Accounts										
292	ML Bank Deposit Program		1.00	292	1.00	292			1	.37

MR J HOWARD COBLE

CMA® ACCOUNT

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Equities											
100	ACXIOM CORP COM	ACXM		07/28/00	22.09	2,209	18.63	1,863	(346)		
125	** AMER EXPRESS COMPANY	AXP		07/24/01	38.90	4,863	48.23	6,028	1,165	50	.82
103	** AMGEN INC COM PV $0.0001	AMGN		04/12/01	32.17	3,313	61.79	6,364	3,050		
44	** AMGEN INC COM PV $0.0001			04/18/01	32.17	1,415	61.79	2,718	1,303		
147	Security Sub-Total					4,728		9,083	4,353		
200	** APPLIED MATERIAL INC	AMAT		11/27/01	22.05	4,411	22.44	4,488	76		
170	ATMEL CORP COM	ATML		09/19/00	18.98	3,226	6.01	1,021	(2,205)		
330	ATMEL CORP COM			08/20/02	3.02	997	6.01	1,983	985		
500	Security Sub-Total					4,224		3,005	(1,220)		
220	** BEA SYSTEMS INC COM	BEAS		11/27/01	19.45	4,281	12.30	2,706	(1,575)		
300	** BJS WHOLESALE CLUB INC	BJ		04/22/03	14.42	4,326	22.96	6,888	2,561		
190	** CORNING INC	GLW		04/18/01	26.19	4,976	10.43	1,981	(2,994)		
110	** E M C CORPORATION MASS	EMC		04/12/01	30.62	3,368	12.92	1,421	(1,947)		
45	** E M C CORPORATION MASS			04/18/01	38.48	1,732	12.92	581	(1,150)		
155	Security Sub-Total					5,100		2,002	(3,097)		
150	** HONEYWELL INTL INC DEL	HON		02/01/02	34.59	5,189	33.43	5,014	(174)	112	2.24
500	** KNIGHT TRADING GROUP INC	NITE		07/24/01	10.13	5,067	14.66	7,330	2,262		
130	** LEHMAN BROTHRS HLDGS COM	LEH		09/30/99	29.77	3,870	77.22	10,038	6,167	62	.62
415	** MICRON TECHNOLOGY INC	MU		04/22/03	9.76	4,050	13.47	5,590	1,539		
70	** RF MICRO DEVICES INC	RFMD		07/28/00	37.13	2,599	10.06	704	(1,895)		
625	SAVIENT PHARMACEUTICALS INC	SVNT		04/18/01	7.78	4,865	4.61	2,881	(1,984)		
270	** SCHWAB CHARLES CORP NEW	SCH		11/27/01	15.89	4,291	11.84	3,196	(1,094)	15	.47
230	TRANSMETA CORP	TMTA		04/19/01	21.39	4,920	3.40	782	(4,138)		
200	** WAL-MART STORES INC	WMT		07/19/88	11.18	2,237	53.05	10,610	8,372	72	.67

MR J HOWARD COBLE

CMA® ACCOUNT

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Adjust/Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Total Equities						76,215		84,193	7,978	312	.37

Current Portfolio

Quantity	Security Description	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
Mutual Funds and Defined Asset Funds									
Equity Funds									
412	DAVIS NY VENTURE FD B (.1210 FRACTIONAL SHARE) INITIAL PURCHASE: 02/09/96	$5,019	$5,865	6,956 N/A	26.42 26.42	10,885 3	3,924 N/A		
1,450	DAVIS NY VENTURE FD A (.1430 FRACTIONAL SHARE) INITIAL PURCHASE: 10/10/97	$35,598	$4,305	36,226 N/A	27.52 27.52	39,904 3	3,673 N/A	268	.67 .67
1,722	PUTNAM VOYAGER FD CL A (.1680 FRACTIONAL SHARE) INITIAL PURCHASE: 07/24/01	$33,001	($5,708)	34,296 N/A	15.85 15.85	27,293 2	(7,002) N/A		
Total Equity Funds			$4,462	77,479		78,092	595	268	.34
Total Funds			$4,462	77,479		78,092	595	268	.34

TOTAL CLIENT INVESTMENT: Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.
CUMULATIVE INVESTMENT RETURN: Estimated Market Value minus Total Client Investment. Cumulative Investment Return is the capital appreciation (depreciation) of all shares purchased, including shares purchased through reinvestment.

UNREALIZED GAIN or (LOSS): Estimated Market Value minus Total Cost Basis. Provided for Tax Planning purposes only and is not applicable to retirement accounts "denoted by N/A".
INITIAL PURCHASE: Date of your initial investment in this fund

Total of Long Portfolio	153,986*	162,578	8,573 *	581	.36

* - Excludes N/A items

CMA® ACCOUNT

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Security Transactions						
12/02	Divd Reinv	10	DAVIS NY VENTURE FD A REINV AMOUNT $266.41 REINV PRICE $26.43000 QUANTITY BOT 10.0800 AS OF 12/01			
Net Total						
Dividends and Interest						
12/02 *	Dividend		DAVIS NY VENTURE FD B			.21
12/02 *	Dividend		DAVIS NY VENTURE FD A			266.41
12/10 *	Dividend		HONEYWELL INTL INC DEL HOLDING 150.0000			28.13
12/31 ¤	Bank Interest		BANK DEPOSIT INTEREST			.09
Net Total						294.84
Other Activity						
12/02	Reinvestment		DAVIS NY VENTURE FD B		.21	
12/02	Divd Reinv		DAVIS NY VENTURE FD B REINV AMOUNT $.21 REINV PRICE $25.39000 QUANTITY BOT .0080 AS OF 12/01			
12/02	Reinvestment		DAVIS NY VENTURE FD A		266.41	
Net Total					266.62	

Monthly Activity

Date	Description	Deposits	Withdrawals	Date	Description	Deposits	Withdrawals
Money Account Transactions							
12/01	ML Bank Deposit Program	15.00		Total		44.00	
12/15	ML Bank Deposit Program	29.00		Net Total		44.00	

CMA® ACCOUNT

Tax Information Summary	This Statement	Year-to-Date
Accrued Interest Paid		
Tax-Exempt		
Reportable		
Accrued Interest Received		
Tax-Exempt		
Reportable		
Gross Proceeds		6,871.19

Although we provide complete year-to-date information for Reportable Accrued Interest Received, Accrued Interest Paid and Tax-Exempt Accrued Interest Received and Paid include only those months we produce your profit and loss statement.

Customer Service For information about your account, please call 1-800-MERRILL (1-800-637-7455). To report Lost or Stolen Visa Cards or Checks, please call 1-800-262-5678.

CMA® ACCOUNT

Agreement Regarding Your Securities Account and Other Important Information
You, the Client, and we, Merrill Lynch, Pierce, Fenner & Smith Inc. (Merrill Lynch), agree as follows:
(1) We will direct your order for a security or option to the marketplace we consider to be the primary market for that security or option.
(2) We will hold bonds and preferred stocks in bulk segregation (except for those held in custodian accounts). In the event of a call for less than an entire issue or series of those securities, the securities to be called will be randomly selected from those held in bulk.
(3) We are not responsible for the loss or destruction of securities that are placed in the custody of a non-U.S. bank or broker or other custodian, and are lost or destroyed as a result of war, civil commotion, enemy action, government acts or any other causes beyond the control of the depository or us.
(4) This statement of account shall be deemed conclusive if not objected to within ten (10) days.
(5) We receive a fee from ISA, banks of up to 2% per annum of the average daily balances. In the RASP and MIL bank deposit programs, this fee is up to .50% and is paid by our affiliated banks.
(6) You will have the right to vote full shares, and we may solicit instructions concerning the voting of full shares held in your account. The voting shares in your account will be governed by the rules and policies of the New York Stock Exchange and the Securities and Exchange Commission then in effect, or other applicable exchange or regulatory provisions.
(7) This statement serves as a confirmation of purchases that result from automatic reinvestment transactions, as well as your AIPS transactions, during the statement period.
(8) As an option client, please advise us promptly of any material change in your investment objectives or financial condition. Individual options commission charges have been included in your confirmation; a summary of this information will be made available to you upon request.
(9) All transactions in your account are subject to the constitution, rules, regulations, customs, usages, rulings and interpretations of the exchange or market, and its clearinghouse, if any, where the transactions are executed, and if not executed on any exchange, the National Association of Securities Dealers, Inc.
(10) We trade for our own accounts as an odd lot dealer, a block positioner and/or arbitrageur. At the time of any transaction in your account, we or an affiliate may have a long or short position in the same security, and our positions may be completely or partially hedged.
(11) We can use your free credit balance in our business and such funds are not segregated. You have the right to receive, in the normal course of business, any free credit balance and any fully paid securities to which you are entitled, subject to any open commitments in any of your accounts.
(12) Merrill Lynch's financial statement is available for your inspection at our office, or a copy will be mailed upon request to: Merrill Lynch, WFC-NY, New York, NY 10281.
(13) If this statement is for a margin account, it is a combined statement of your margin account and special memorandum account maintained for you pursuant to applicable regulations. The permanent record of the separate account, as required by Regulation T, is available for your inspection upon request. You should retain this statement for use with your next statement to calculate interest charges, if any, for the period covered by this statement. The interest charge period will parallel the statement period, except that interest due for the final day of the statement period will be carried over and appear on next month's statement.
(14) The Securities Investor Protection Corporation (SIPC) and our excess-SIPC bond do not cover assets that are not securities or assets that are not held at Merrill Lynch, such as cash on deposit at Merrill Lynch Bank USA, Merrill Lynch Bank & Trust Co. or other depository institutions, and certificates of deposit purchased through Merrill Lynch. Those deposits are protected by the Federal Deposit Insurance Corporation. Merrill Lynch is not a bank. Unless otherwise disclosed, investments through Merrill Lynch ARE NOT FDIC-INSURED, ARE NOT BANK GUARANTEED, AND MAY LOSE VALUE.

Prices and Valuations
While we believe our pricing information to be reliable, we cannot guarantee its accuracy.
Managed Trust Units: Information is based on data from the Merrill Lynch Trust Company or its agent. Neither the Trust nor its units are held in your Merrill Lynch account and are not subject to SIPC.
Insurance Policies: Information is based on data from the insurer that issued the policy. Merrill Lynch is not responsible for the calculation of policy values. Policies are generally not held in your Merrill Lynch account. If Merrill Lynch as custodian or trustee holds a policy that is a security, SIPC protection and excess-SIPC protection applies.
Cost Data: Cost data and acquisition dates for securities not purchased in your account or purchased before 1997 are entered manually from data provided by you. Most cost figures are adjusted for capital changes, including identifiable returns of principal, after 1997. Please review this information for accuracy, as we cannot be held responsible for omitted or restated data.

Realized Capital Gain and Losses
Versus purchase (VSP) or versus sale (VSS) dates are used in calculating gains and losses when you designate specific tax lots for liquidation consistent with your tax planning. This feature may not cover all transactions. Please consult your tax advisor to determine the tax consequences of your securities transactions. When computing capital gains and losses we strive to be accurate. However, the computation shown on your statement does not constitute an official accounting of gains and losses, and Merrill Lynch does not report capital gains or losses to the I.R.S. The enhanced statement is not a substitute for your own records and the Consolidated Tax Reporting Statement (Form 1099).

Prices and Valuations (Cont)
Fixed-Income Securities: Market values are estimated values obtained from various sources and may be based on bids, prices within the bid/offer spread, closing prices, a matrix methodology utilizing general market levels, the value of comparable securities and/or analytic models. Pricing estimates do not constitute bids or offers to purchase or sell any security. Actual prices realized at sale, or paid at the time of purchase, may be more or less than the value reflected on the statement.

Symbols and Abbreviations

π	Interest reported to IRS.		
*	Gross Proceeds reported to the IRS.	N/A	Value and/or cost data not available.
◊	Dividends reported to the IRS.	N/C	Not Calculated
	Transactions reported to IRS.	N/N	Non-negotiable securities.
NOCC	Options Clearing Corporation.	N/O	Held registered in your name.

** Merrill Lynch maintains a fundamental opinion on this company.
# Transaction you requested required same-day payment - Merrill Lynch retained last day's dividend to offset cost of advancing payment on your behalf.
RD Bonds are changeable from coupon to registered and vice versa without charge.
RG Bonds registered for both principal and interest.
(↑) Indicates that our global securities research division has upgraded (↓) or downgraded (↑) its fundamental opinion on a security.
N/N N/O Non-negotiable securities held registered in your name.
N/O CUST Non-negotiable custodian Registration.
NPC Interests in assets not registered in the name of nor held by Merrill Lynch or its nominees and held by you or registered in your name with the issuer or its agent. Merrill Lynch does not control or act as custodian. SIPC and excess SIPC protection do not apply. These assets are included on this statement solely as a service to you.

Visa foreign currency transactions are converted to U.S. dollars using either a government-mandated rate or a wholesale rate, which USA increases by 1% and Merrill Lynch increases by 1%; the "Currency Conversion" amount on your statement shows the amount of the 2% increase in the transaction. Equity Sectors: Global Industry Classification Standard was developed by and is the exclusive property and a service mark of Morgan Stanley Capital Int'l Inc. and Standard & Poor's, a division of the McGraw-Hill Companies, Inc. and is licensed for use by Merrill Lynch.

*** END OF STATEMENT ***

MR J HOWARD COBLE

Page	Statement Period	Account No.
7 of 7	11/29/03 TO 12/31/03	746-54198

018018 9072

ACCOUNT #	F/A#	PAGE #
746 88031	9972	1

STATEMENT PERIOD
11/29/03 TO 12/31/03

FINANCIAL ADVISOR
ROBERT C KETNER
(336) 333-7423

ACCOUNT TYPE
IRA

OFFICE SERVING YOUR ACCOUNT:
800 GREEN VALLEY RD. SUITE 400
GREENSBORO NC 27408

MLPF& S CUST FPO
J HOWARDCOBLE IRA
FBO J HOWARDCOBLE
2102 N. ELM ST
STE B
GREENSBORONC 27408

Merrill Lynch
IRA

***** ACCOUNT SUMMARY *****

PRICED PORTFOLIO		DIVIDEND/INTEREST	
AS OF 12/31/03. . . .	$33,137.66	THIS STATEMENT.....	$.09CR
AS OF 11/28/03. . . .	$33,198.66	THIS YEAR	$61.41CR

***** CONTRIBUTION INFORMATION *****

	TAX YEAR 2002	TAX YEAR 2003
IRA CONTRIBUTIONS	$3,500.00	$.00
INCLUDED IN THE ABOVE: CONTRIBUTIONS FOR 2002 MADE IN 2003	$3,500.00	

IRA CONTRIBUTIONS YOU WISH TO RECORD AS NON-DEDUCTIBLE (LIFE-TO-DATE): $2,000.00

***** DISTRIBUTION INFORMATION *****

	TAX YEAR 2002	TAX YEAR 2003
NORMAL	$1,146.51	$.00

***** DAILY ACCOUNT ACTIVITY *****

DATE	TRANSACTION	DESCRIPTION	PRICE	AMOUNT
11 29	OPENING BALANCE			$.30CR
12 02	*Dividend	DAVIS NY VENTURE FD B		$.09CR
12 02	Reinvestment	DAVIS NY VENTURE FD B		$.09
12 02	Divd Reinv	DAVIS NY VENTURE FD B REINV AMOUNT $.09 REINV PRICE $25.39000 QUANTITY BOT .0040 AS OF 12/01		
12 31	CLOSING BALANCE			$.30CR

***** CURRENT PORTFOLIO *****

QUANTITY	INVESTMENT DESCRIPTION	CURRENT PRICE	MARKET VALUE	CURR. YIELD	EST. INCOME
150	**APPLIED MATERIAL INC	22.440	$3366		
225	ATMEL CORP COM	6.010	$1352		
175	**BEA SYSTEMS INC COM	12.300	$2152		
165	**BJS WHOLESALE CLUB INC	22.960	$3788		
100	**LEHMAN BROTHRS HLDGS COM	77.220	$7722	.62	$48
250	**MICRON TECHNOLOGY INC	13.470	$3367		
350	SAVIENT PHARMACEUTICALS INC	4.610	$1613		
215	**SCHWAB CHARLES CORP NEW	11.840	$2545	.47	$12
180.5380	DAVIS NY VENTURE FD B	26.420	$4769		
139.9450	PUTNAM VOYAGER FD CL A	15.850	$2218		
TOTALS FOR PRICED INVESTMENTS			$32892		$60

ACCOUNT #	F/A#	PAGE #
746 88031	9972	2

MLPF& S CUST FPO
J HOWARD COBLE IRA

***** CURRENT PORTFOLIO *****

MONEY ACCOUNT	OPENING BALANCE AS OF 11/29	CLOSING BALANCE AS OF 12/31	DIVIDENDS/INTEREST THIS STMT.	YEAR TO DATE
ML BANK USA RASP	$245.36	$245.36	$.00	$.16

FOR PURPOSES OF CALCULATING REQUIRED MINIMUM DISTRIBUTIONS OR COMPLETING IRS FORM 8606, YOU ARE REQUIRED TO USE THE VALUE OF YOUR ACCOUNT AS OF 12/31/03. THIS VALUE SHOULD INCLUDE YOUR PRICED PORTFOLIO TOTAL AND THE VALUE OF CERTAIN LIMITED PARTNERSHIPS AND OTHER DIRECT INVESTMENTS AS WELL AS ANY SECURITIES THAT WE ARE UNABLE TO PRICE - MARKED "UNAVAILABLE". THE "YEAR-END PLAN VALUE" SHOWN CONSISTS OF YOUR PRICED PORTFOLIO TOTAL PLUS THE ESTIMATED VALUE OF LIMITED PARTNERSHIPS OR OTHER DIRECT INVESTMENTS REPORTED ON YOUR YEAR-END STATEMENT.

YEAR-END PLAN VALUE AS OF 12/31/03: $33,137.66

FOR IRA, IRRA, SEP/IRA, SIMPLE/IRA, ROTH IRA AND COVERDELL ESA ACCOUNTS, THE YEAR-END PLAN VALUE REPRESENTS THE VALUATION WE MUST FURNISH TO YOU AND THE INTERNAL REVENUE SERVICE AS PART OF THE IRS FORM 5498 REPORTING REQUIREMENTS.

SEE ENCLOSED NEWSLETTER FOR DETAILS ON AN IMPORTANT CHANGE IN THE SUPPLEMENTAL COVERAGE TO YOUR ACCOUNT PROTECTION.

CAP First 12/01/2003 thru 12/31/2003 REALACCOUNT STATEMENT

1 4002630445 NC R P

J EDWARD COBLE
5741 BRANDLEGATE DR UNIT L
GREENSBORO NC 27409-3032

For investment guidance or service
Call your Financial Advisor,
MICHAEL CHARLES RICHARD , at (800) 326-2260

For Client Service(888) 213-1363
Or write CAP Department
One Wachovia Center
Charlotte NC 28288-1154

CAP Account number: 4002630445
Brokerage Account number: 10593911

Account Overview

Asset & Earnings Summary

Type of Asset	Previous market value	Market value 12/31	Percent of assets	Earnings this month	Earnings this year
FDIC Insured	8,041.38	24,438.84	89.24	5.13	8.10
Evergreen Money Market	0.00	0.00			5.51
Investment Portfolio:					
Cash					
Money Market Mutual Funds					
Stocks and Options					
Bonds					
Mutual Funds	2,886.85	2,968.69	10.84		
Investment Portfolio Subtotal	2,886.85	2,968.69			
Annuities					
Retirement					
Total	$ 10,928.23	$ 27,407.53	100.0%	$ 5.13	$ 13.61

SECURITIES AND INSURANCE PRODUCTS:
NOT INSURED BY FDIC OR ANY FEDERAL GOVERNMENT AGENCY | MAY LOSE VALUE | NOT A DEPOSIT OF OR GUARANTEED BY THE BANK OR ANY BANK AFFILIATE

Brokerage services are offered through Wachovia Securities, LLC, a registered broker-dealer, member of the NASD, and separate non-bank affiliate of Wachovia Corporation. Brokerage accounts are carried by First Clearing, LLC, member NYSE and SIPC.

Fixed annuities are offered through insurance affiliates of Wachovia Corporation. Variable annuities are offered through Wachovia Securities and insurance affiliates of Wachovia Corporation.

WACHOVIA BANK, NATIONAL ASSOCIATION

CAP First 12/01/2003 thru 12/31/2003

REPLACEMENT STATEMENT

2 4002630445 WC R P

Account number: 4002630445
Brokerage Account number: 20893011

News from Wachovia:

THE FOLLOWING FEE CHANGES TAKE EFFECT ON FEBRUARY 1, 2004: REPOSITORY/CANCEL ITEM CHARGEBACK FEE - $10. OUTGOING DOMESTIC WIRE TRANSFERS - $20.

Rate Summary as of 12/31/2003

FDIC Insured *	0.254
Average Rate This Statement Period	0.254

* Annual Percentage Yield

Your CAP Account offers a variety of different daily sweep options. If you have any questions about sweep options including rates, or you would like to change your sweep option, please contact your Financial Advisor or contact us at 888-213-1383.

Gain/Loss Summary *

Realized Gain/(Loss) - YTD	$ 0.00
Unrealized Gain/(Loss)	$ 343.69

* Refer to relevant section if applicable

Account Fees/Expenses

	This Period	This year
Account Maintenance Fees	0.00	60.00
Other Account Fees	0.00	10.00

Investment Account

Detail of Security Holdings

Description	Symbol	Quantity	Price	Market value 12/31	Projected annual income	Projected yield
Mutual Funds						
EVERGREEN OMEGA FD CL B	EKEMX	140.09900	21.1900	2,968.69	Not available	Not available
Total				$ 2,968.69		

WACHOVIA BANK, NATIONAL ASSOCIATION

CAP First 12/01/2003 thru 12/31/2003

REALIZED/UNREALIZED STATEMENT

3 4002630445 WC R P

Account number: 4002630445
Brokerage Account number: 20593911

Unrealized Gain/Loss

This section includes estimated unrealized gains or losses for your information only and should not be used for tax purposes. You should review it for accuracy. If acquisition information is not available, the gain/loss information may not be displayed and section and summary totals may not reflect your complete portfolio. Cost basis information may have been provided by the account owner and is not verified by First Clearing, LLC. Systematic Investments in mutual funds and reinvested dividends for both stocks and mutual funds have been consolidated for each position. Bonds purchased at a premium or O.I.D. (Original Issue Discount) bonds will be carried at the original cost basis. Factored bonds (GNMA, CMO, etc.) will be adjusted for paydown of principal.

Description	Quantity	Acquisition Date	Acquisition Cost	Market value 12/31	Unrealized Gain/Loss
Mutual Funds					
EVERGREEN OMEGA FD CL B					
Systematic Investment	140.09900		2,625.00	2,968.69	343.69
Total			$ 2,625.00	$ 2,968.69	$ 343.69

Account Summary

	This month
SWEEP OPENING BALANCE	$ 8,061.38 +
DEPOSITS	29,900.00 +
CHECKS	13,452.67 -
OTHER WITHDRAWALS	75.00 -
SERVICE FEES	0.00
SWEEP DIVIDENDS	5.13 +
Sweep Closing Balance	$ 24,438.84 +

Daily Activity

Deposits

Date	Amount	Description	Check Ref Number
12/10	28,900.00	DEPOSIT - CHECKING (1 ITEM)	7711460239
Total	$ 28,900.00		

Daily Activity continued on next page

WACHOVIA BANK, NATIONAL ASSOCIATION

CAD First 12/01/2003 thru 12/31/2003

REPLACEMENT STATEMENT

4 4002630445 WC R P

Account number: 4002630445
Brokerage Account number: 20583911

Daily Activity continued

Checks

Number	Amount	Date	Check Ref Number	Number	Amount	Date	Check Ref Number
1514	60.00	12/23	7813051772	1529	86.74	12/12	7810600196
1518*	118.37	12/02	1715024926	1530	69.72	12/12	1716800174
1519	191.62	12/01	3813338817	1531	5,000.00	12/26	3414251764
1520	580.00	12/09	7819670728	1533*	17.81	12/23	7813123887
1521	1,270.33	12/11	3612134419	1534	471.00	12/22	7812445269
1522	19.38	12/09	3411303965	1535	1,744.00	12/22	5415299235
1523	80.00	12/10	7810208119	1536	200.00	12/18	7812024378
1524	32.70	12/11	3612292303	1537	101.80	12/29	5713024941
1525	27.09	12/05	5718642711	1538	3,000.00	12/24	7813489226
1526	22.21	12/11	3612292304				
1527	220.00	12/16	3517897698	Total	$ 19,452.67		
1528	200.00	12/05	7819054535				

* Indicates a break in check number sequence

Other Withdrawals

Date	Amount	Description	Check Ref Number
12/17	75.00	BROKERAGE DEBIT	
Total	$ 75.00		

Summary of Investment Account Activity

Date	Transaction	Description	Quantity	Price	Credit Amount	Debit Amount
12/16	PURCHASE	EVERGREEN OMEGA FD CL B AS OF 12/16/03	3.66900	20.44		75.00

First Citizens Investor Services, Inc.
3128 Smoketree Court
Raleigh, NC 27604
(800) 229-0205

YOUR **Brokerage** Account

C000000002398
:274093032848:

JOHN HOWARD COBLE
5741 L BRAMBLEGATE DR
GREENSBORO NC 27409-3032

Account Number: 4KV-574036
Statement Period: 09/27/2003 - 12/31/2003

Valuation at a Glance

	This Period
Beginning Account Value	$23,515.85
Dividends/Interest	74.02
Change in Account Value	2,464.95
Ending Account Value	$26,054.82

Your Investment Officer:
JOHN GARWOOD
(800) 444-0493

Asset Allocation

	Value Last Period	Value This Period	Percent Allocation
Mutual Funds	23,515.85	26,054.82	100%
Account Total	$23,515.85	$26,054.82	100%

Your Account is 100% invested in Mutual Funds.

For Your Information

Effective September 1, 2003 First Citizens Investor Services is updating it's Commission Fee Schedule and will begin assessing an outgoing transfer fee in the amount of $75. This outgoing transfer fee will be charged to the client's account when the client initiates a full outgoing transfer to another financial institution.

C000000002398

Clearing through Pershing A BNY Securities Group Co. Solutions from The Bank of New York
One Pershing Plaza, Jersey City, New Jersey 07399

PAR-02-CUTSHEET

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Customer Service Information

Your Investment Officer:
Identification Number: 526
JOHN GARWOOD
FIRST CITIZENS INVESTOR SERVICES
100 SOUTH ELM STREET
GREENSBORO NC 27401-2638
Telephone Number: (800) 444-0493
Fax Number: (336) 574-0172

Messages

"FIRST CITIZENS INVESTOR SERVICES OFFERS YOU THE ABILITY TO VIEW YOUR INVESTMENT ACCOUNT AND TO PLACE BUY AND SELL ORDERS THROUGH OUR WEBSITE. VISIT WWW.FIRSTCITIZENS.COM TO ACCESS YOUR ACCOUNT OR TO GET INSTRUCTIONS ON HOW TO ACTIVATE YOUR ACCOUNT SO YOU CAN TAKE ADVANTAGE OF THESE FEATURES AVAILABLE TO YOU AS AN INVESTOR SERVICES CLIENT."

INVESTMENT AND INSURANCE PRODUCTS AND SERVICES ARE OFFERED BY FIRST CITIZENS INVESTOR SERVICES, INC., WHICH IS A REGISTERED BROKER-DEALER AND LICENSED INSURANCE AGENCY, NOT A BANK. THESE PRODUCTS AND SERVICES ARE NOT OFFERED BY ANY BANK AND FIRST CITIZENS INVESTOR SERVICES, INC. IS SEPARATE AND DISTINCT FROM BANKS WITH WHICH IT IS AFFILIATED. PRODUCTS AND SERVICES OFFERED BY FIRST CITIZENS INVESTOR SERVICES, INC. (1) ARE NOT INSURED OR GUARANTEED BY THE FEDERAL DEPOSIT INSURANCE CORPORATION (FDIC) OR ANY OTHER AGENCY OF THE UNITED STATES; (2) ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, ANY BANK OR ANY AFFILIATE OF A BANK, OR FIRST CITIZENS INVESTOR SERVICES, INC.; AND (3) INVOLVE INVESTMENT RISKS, INCLUDING THE POSSIBLE LOSS OF PRINCIPAL INVESTED AND POSSIBLE LOSS OF VALUE.

"EFFECTIVE JANUARY 1, 2004 FIRST CITIZENS INVESTOR SERVICES IS UPDATING ITS COMMISSION AND FEE SCHEDULE AND WILL BEGIN ASSESSING ITS ANNUAL CUSTODY FEE IN THE AMOUNT OF $50.00 PER ACCOUNT. THIS ANNUAL CUSTODY FEE WILL BE CHARGED TO REGULAR BROKERAGE ACCOUNTS, NOT SELF-DIRECTED RETIREMENT ACCOUNTS, THAT EITHER (I) MAINTAIN AN ACCOUNT BALANCE OF LESS THAN $50,000.00, OR (II) DID NOT EXECUTE A TRANSACTION WITHIN THE PRIOR CALENDAR YEAR. PLEASE CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER INFORMATION OR TO ADDRESS QUESTIONS YOU MAY HAVE."

First Citizens Investor Services, Inc.
3128 Smokestree Court
Raleigh, NC 27604
(800) 229-0205

[redacted]

your **Brokerage Account**

Statement Period: 09/27/2003 - 12/31/2003

Messages (continued)

EXCESS ACCOUNT PROTECTION UPDATE

WORKING ON BEHALF OF YOUR FINANCIAL ORGANIZATION, PERSHING PROVIDES ACCOUNT PROTECTION FOR THE NET EQUITY OF YOUR SECURITIES POSITIONS AND CASH IN YOUR ACCOUNT. OF THAT TOTAL, THE SECURITIES INVESTOR PROTECTION CORPORATION (SIPC) PROVIDES $500,000 OF NET EQUITY PROTECTION, INCLUDING $100,000 FOR CLAIMS FOR CASH AWAITING REINVESTMENT (SIPC PROTECTION). PERSHING PROVIDES THE ADDITIONAL PROTECTION (EXCESS SIPC) ON TERMS SIMILAR TO SIPC THROUGH A COMMERCIAL INSURER. VISIT WWW.SIPC.ORG FOR MORE INFORMATION ABOUT SIPC.

EFFECTIVE FEBRUARY 16, 2004, THE COMMERCIAL INSURER THROUGH WHICH PERSHING WILL PROVIDE EXCESS SIPC WILL CHANGE TO CUSTOMER ASSET PROTECTION COMPANY (CAPCO), A LICENSED NEW YORK INSURER.

ACCOUNT PROTECTION APPLIES WHEN A SIPC MEMBER FIRM FAILS FINANCIALLY AND IS UNABLE TO MEET OBLIGATIONS TO SECURITIES CLIENTS, BUT IT DOES NOT PROTECT AGAINST LOSSES FROM THE RISE AND FALL IN THE MARKET VALUE OF INVESTMENTS.

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Messages (continued)

ANNUAL MARGIN DISCLOSURE STATEMENT

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SECURITIES PURCHASED ON MARGIN ARE YOUR FINANCIAL ORGANIZATION'S AND PERSHING'S COLLATERAL FOR THE LOAN TO YOU. IF THE SECURITIES IN YOUR ACCOUNT DECLINE IN VALUE, SO DOES THE VALUE OF THE COLLATERAL SUPPORTING YOUR LOAN. AS A RESULT, YOUR FINANCIAL ORGANIZATION OR PERSHING CAN TAKE ACTION, SUCH AS ISSUE A MARGIN CALL AND/OR SELL SECURITIES OR OTHER ASSETS IN ANY OF YOUR ACCOUNTS HELD WITH PERSHING IN ORDER TO MAINTAIN THE REQUIRED EQUITY IN THE ACCOUNT.

.

IT IS IMPORTANT THAT YOU FULLY UNDERSTAND THE RISKS INVOLVED IN TRADING SECURITIES ON MARGIN. THESE RISKS INCLUDE THE FOLLOWING:
* YOU CAN LOSE MORE FUNDS THAN YOU DEPOSIT IN THE MARGIN ACCOUNT.
* YOUR FINANCIAL ORGANIZATION OR PERSHING CAN FORCE THE SALE OF SECURITIES OR OTHER ASSETS IN YOUR ACCOUNT(S).
* YOUR FINANCIAL ORGANIZATION OR PERSHING CAN SELL YOUR SECURITIES OR OTHER ASSETS WITHOUT CONTACTING YOU.
* YOU ARE NOT ENTITLED TO CHOSE WHICH SECURITIES OR OTHER ASSETS IN YOUR ACCOUNT(S) ARE LIQUIDATED OR SOLD TO MEET A MARGIN CALL.
* YOUR FINANCIAL ORGANIZATION OR PERSHING CAN INCREASE ITS "HOUSE" MAINTENANCE MARGIN REQUIREMENTS AT ANY TIME AND IS NOT REQUIRED TO PROVIDE YOU ADVANCE WRITTEN NOTICE.
* YOU ARE NOT ENTITLED TO AN EXTENSION OF TIME ON A MARGIN CALL.

THE NASD REQUIRES THAT NASD MEMBER FIRMS PROVIDE THE FOLLOWING INFORMATION CONCERNING THE NASD PUBLIC DISCLOSURE PROGRAM:

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THE NASD PUBLIC DISCLOSURE PROGRAM HOTLINE NUMBER IS (800) 289-9999.

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THE NASD REGULATION WEB SITE ADDRESS IS WWW.NASDR.COM.

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AN INVESTOR BROCHURE THAT INCLUDES INFORMATION DESCRIBING THE PUBLIC DISCLOSURE PROGRAM MAY BE OBTAINED FROM THE NASD.

Transactions in Date Sequence

Process/ Settlement Date	Activity Type	Description	Quantity	Price	Accrued Interest	Amount
10/28/03	CASH DIVIDEND RECEIVED	FEDERATED BOND FUND CLASS B 594.2120 SHRS RD 10/23 PD 11/03/03				24.36
10/28/03	REINVEST CASH INCOME	FEDERATED BOND FUND CLASS B 594.2120 SHRS SHRS PURCH. AT $9.04000 RD 10/23 PD 11/03/03	2.695			-24.36

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First Citizens Investor Services, Inc.
3128 Smoketree Court
Raleigh, NC 27604
(800) 229-0205

your **Brokerage** Account

Statement Period: 09/27/2003 - 12/31/2003

Transactions in Date Sequence (continued)

Process/ Settlement Date	Activity Type	Description	Quantity	Price	Accrued Interest	Amount
11/26/03	CASH DIVIDEND RECEIVED	FEDERATED BOND FUND CLASS B 596.9070 SHRS RD 11/21 PD 12/01/03				25.07
11/26/03	REINVEST CASH INCOME	FEDERATED BOND FUND CLASS B 596.9070 SHRS SHRS PURCH. AT $9.08000 RD 11/21 PD 12/01/03	2.761			-25.07
12/30/03	CASH DIVIDEND RECEIVED	FEDERATED BOND FUND CLASS B 599.6680 SHRS RD 12/23 PD 12/31/03				24.59
12/30/03	REINVEST CASH INCOME	FEDERATED BOND FUND CLASS B 599.6680 SHRS SHRS PURCH. AT $9.16000 RD 12/23 PD 12/31/03	2.684			-24.59
Total Value of all Transactions						$0.00

The price and quantity displayed may have been rounded.

Portfolio Holdings

Quantity	Description	Market Price	Market Value	Symbol	Estimated Annual Income	Estimated Yield
Mutual Funds	100.00% of Portfolio					
564.742	FEDERATED AMERICAN LEADERS FUND CLASS B Dividend Option: Reinvest Capital Gains Option: Reinvest	23.1100	13,051.19	FALBX		
1,004.304	FEDERATED LARGE-CAP GROWTH FUND CLASS B Dividend Option: Reinvest Capital Gains Option: Reinvest	7.4600	7,492.11	FLGBX		
602.352	FEDERATED BOND FUND CLASS B Dividend Option: Reinvest Capital Gains Option: Reinvest	9.1500	5,511.52	FDBBX	303.58	5.5046
Total Mutual Funds			$26,054.82		$303.58	

Clearing through Pershing A BNY Securities Group Co. Solutions from The Bank of New York
One Pershing Plaza, Jersey City, New Jersey 07399

Portfolio Holdings (continued)

Description	Market Value	Estimated Annual Income
Total Portfolio Holdings	$26,054.82	$303.58

Disclosures and Other Information

Pricing - Securities prices may vary from actual liquidation value. Prices shown should only be used as a general guide to portfolio value. Prices are received from various pricing services. However, pricing services are sometimes unable to provide timely information. Where pricing sources are not readily available, particularly on certain debt securities, estimated prices may be generated by a matrix system taking various factors into consideration. The pricing of listed options takes into account the last closing price, as well as the current bid and offer prices. Where securities have not been priced, such securities have not been included in the Asset Allocation information at the beginning of this statement.

Reinvestment - The dollar amount of Mutual Fund distributions, Money Market Fund income, or dividends or other securities shown on your statement may have been reinvested into additional shares. You will not receive confirmation of these reinvestment transactions. However, information pertaining to these transactions which would otherwise appear on confirmations, including the time of execution and the name of the person from whom your security was purchased, will be furnished to you upon written request to your introducing firm. In dividend reinvestment transactions, Pershing acts as your agent and receives payment for order flow, the source and nature of which payment will be furnished to you upon written request to your introducing firm.

Option Disclosure - Information with respect to commissions and other charges incurred in connection with the execution of option transactions has been included in confirmations previously furnished to you. A summary of this information is available to you promptly upon your written request directed to your introducing firm. In order to assist your introducing firm in maintaining current background and financial information concerning your option accounts, please promptly advise them in writing of any material change in your investment objectives or financial situation. Expiring options which are valuable are exercised automatically pursuant to the exercise by exception procedure of the Options Clearing Corporation. Additional information regarding this procedure is available upon written request to your introducing firm.

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TERMS AND CONDITIONS

GENERAL INFORMATION

1. All orders and transactions shall be solely for your account and risk shall be subject to the constitution, rules, regulations, customs, usages, rulings and interpretations of the exchange or market and the clearing facility, if any, where the transactions are executed and/or settled, or if applicable, of the National Association of Securities Dealers, Inc., and to all applicable laws and regulations.
2. Whenever you are indebted to Pershing LLC ("Pershing") for any amount, all securities held by it for you in any account in which you have any interest shall secure all your liabilities to Pershing, and Pershing may in its discretion at any time, without tender, demand or notice to you, close or reduce any or all of your accounts by public or private sale or purchase or both of all or any securities carried in such accounts; any balance remaining due Pershing to be promptly paid by you.
3. Whenever you are indebted to Pershing for any amount, all securities carried for your account are or may be, without further notice to you, loaned or pledged by Pershing, either separately or under circumstances which will permit the commingling thereof with other securities for any amount less than, equal to or greater than your liabilities to Pershing, but not under circumstances for an amount prohibited by law.
4. Title to securities sold to you, where Pershing has acted as principal, shall remain with Pershing until the entire purchase price is received or until the settlement date, whichever is later.
5. Any free credit balance carried for your account represents funds payable upon demand which, although properly accounted for on Pershing's books of record, are not segregated and may be used in the conduct of its business.
6. You may have received confirmations for transactions which do not appear on your statement. If so, the transactions will appear on your next periodic statement. Such transactions must be considered by you when computing the value of your account. This is especially true if you have written options which have been exercised.
7. If you maintain a margin account, this is a combined statement of your general account and a special memorandum account maintained for you under Regulation T of the Board of Governors of the Federal Reserve System. The permanent record of the separate account as required by Regulation T is available for your inspection upon request.
8. Interest charged on debit balances in your account appears on the statement. The rate of interest and period covered are indicated. The rate may change from time to time due to fluctuations in money rates or other reasons. Interest is computed as described in material previously furnished to you. Please contact your financial institution if you desire additional copies.
9. A financial statement of Pershing is available for your personal inspection at Pershing's offices. A copy of it will be mailed upon your written request or you can view it online at Pershing.com
10. This statement should be retained for your records.
11. Dividends, interest and other distributions shown on this statement were classified as taxable or nontaxable based on certain information known as of the distribution date. This classification is subject to change and is solely intended for use as general information.

    After year end, Pershing is required to provide tax information to the Internal Revenue Service and other governmental authorities. At that time Pershing will provide that information on the annual tax information statement to you; use that statement to prepare your tax filings. The tax statement also includes other useful information to assist in accumulating the data to prepare your tax returns.
12. Pershing does not provide tax, investment or legal advisory services and no one associated with Pershing is authorized to render such advice. Do not rely upon any such advice, if given. Investors are encouraged to consult their tax advisors to determine the appropriate tax treatment of their business.
13. Securities and cash held in custody by Pershing for your account are protected up to the total amount held in the account. Of this total, the Securities Investor Protection Corporation (SIPC) provides $500,000 of coverage, including $100,000 for claims for cash. The remaining coverage on securities and cash is provided by Pershing through a commercial insurer. The account protection applies when a SIPC member firm fails financially and is unable to meet obligations to securities clients, but it does not protect against losses from the rise and fall in the market value of investments.
14. Pershing trades for its own account as a market maker, specialist, odd lot dealer, block positioner, arbitrageur and/or investor. Consequently, at the time of any transaction you may make, Pershing may have a position in such securities, which position may be partially or completely hedged.
15. If average price transaction is indicated on the front of this statement your financial institution or Pershing may have acted as principal, agent or both. Details available upon request.
16. This statement will be deemed conclusive and an account stated unless you advise Pershing in writing of any objection to it within ten days after receipt. Any such objection should be sent to Pershing at One Pershing Plaza, Jersey City, New Jersey 07399, Attention: Compliance Department.

    ERRORS AND OMISSIONS EXCEPTED.

PORTFOLIO HOLDINGS

This section includes the net market value of the securities in your account on a settlement date basis, including short positions, at the close of the statement period. The market prices have been obtained from quotation services which we believe to be reliable; however, we cannot guarantee their accuracy. Securities for which a price is not available are marked "N/A" and are omitted from the Total.

The Annual Income, which is an estimated figure, is the current interest or most recently declared dividend for each security and is annualized. This figure particularly on equity mutual funds can vary substantially from one year to the next. As a result, actual amounts distributed may be more or less than those estimated on this statement. The Annual Income is then divided by the current Market Value to give the Estimated Yield which too could vary substantially because the income is estimated and it does not take account of your holding period. Annual income has been obtained from sources believed to be reliable, but no assurance can be made as to accuracy.

Accrued Interest represents interest earned but not yet received.

THE ROLE OF PERSHING

Pershing carries your account as clearing broker pursuant to a clearing agreement with your financial institution. Pershing may accept from your financial institution without inquiry or investigation (i) orders for the purchase and sale of securities and other property and (ii) any other instructions concerning your account. Pershing is not responsible or liable for any acts or omissions of your financial institution or its employees and it does not supervise them. Pershing provides no investment advice nor does it assess the suitability of any transaction or order. Pershing acts as the agent of your financial institution and you agree that you will not hold Pershing or any person controlling or under common control with it liable for any investment losses incurred by you.

Pershing performs several key functions at the direction of your financial institution. It acts as custodian for funds and securities you may deposit with it directly or through your financial institution or that it receives as the result of securities transactions it processes. Inquiries concerning the positions and balances in your account may only be directed to the Pershing Customer Service Department at 201-413-3333. All other inquiries regarding your account or activity should be directed to your financial institution. For a description of other functions performed by Pershing please consult the Disclosure Statement provided to you upon the opening of your account.

Your financial institution is responsible for adherence to the securities laws, regulations and rules which apply to it regarding its own operations and the supervision of your account, its sales representatives and other personnel. Your financial institution is also responsible for approving the opening of accounts and obtaining account documents; the acceptance and, in certain instances, execution of securities orders; the assessment of the suitability of those transactions, where applicable; the rendering of investment advice, if any, to you and in general, for the ongoing relationship that it has with you.

Pershing may capture and store data about you such as your financial information and investment objectives. However, Pershing is not reviewing this information and evaluating whether your investments comport with your financial status and objectives and you hereby release Pershing from any liability to do so. Similarly, Pershing may capture and store information about whether a broker or an introducing firm is registered in a given state. You hereby release Pershing from any liability to review this data or to evaluate whether a particular security is registered or exempt from registration in your State.

This notice is not meant as a definitive enumeration of every possible circumstance, but as a general disclosure.
If you have any questions regarding this notice or if you would like additional copies of the Disclosure Statement, please contact your financial institution.

PAYMENT FOR ORDER FLOW PRACTICES

The following statement is provided to you as required by Rule 11Ac1-3 of the Securities Exchange Act of 1934.
Pershing LLC and its affiliate, Pershing Trading Company, L.P. ("PTC"), send certain equity orders to exchanges, Electronic Communication Networks or broker-dealers during normal business hours and during extended trading sessions. Certain venues provide payments or charge access fees to Pershing or PTC depending upon the characteristics of the order and any subsequent execution. The details of these payments and fees are available upon written request.
Pershing receives compensation for directing listed options order flow to certain option exchanges. Compensation is generally in the form of a per contract cash payment.
Pershing and PTC have selected certain market makers to provide execution of OTC securities transactions who have agreed to accept orders, transmitted electronically up to a specified size, and to execute them at or better than the national best bid or offer (NBBO). On larger orders, or if the designated market makers do not make a market in the subject security, Pershing and PTC directly contact market makers to obtain an execution. The designated market makers to whom orders are automatically routed are selected based on the consistently high quality of their OTC executions in one or more market segments and their ability to provide opportunities for executions at prices superior to the NBBO.
If an order for an exchange-listed security is not immediately executable on the exchange to which it is routed, such order may be represented in the national marketplace using the various means available for price discovery.
Pershing and PTC also regularly review reports for quality of execution purposes.

ARBITRATION

ARBITRATION DISCLOSURES:

- ARBITRATION IS FINAL AND BINDING ON THE PARTIES.
- THE PARTIES ARE WAIVING THEIR RIGHT TO SEEK REMEDIES IN COURT, INCLUDING THE RIGHT TO JURY TRIAL.
- PRE-ARBITRATION DISCOVERY IS GENERALLY MORE LIMITED THAN AND DIFFERENT FROM COURT PROCEEDINGS.
- THE ARBITRATORS' AWARD IS NOT REQUIRED TO INCLUDE FACTUAL FINDINGS OR LEGAL REASONING AND ANY PARTY'S RIGHT TO APPEAL OR TO SEEK MODIFICATION OF RULINGS BY THE ARBITRATORS IS STRICTLY LIMITED.
- THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.

ARBITRATION AGREEMENT

ANY CONTROVERSY BETWEEN YOU AND US SHALL BE SUBMITTED TO ARBITRATION BEFORE THE NEW YORK STOCK EXCHANGE, INC., ANY OTHER NATIONAL SECURITIES EXCHANGE ON WHICH A TRANSACTION GIVING RISE TO THE CLAIM TOOK PLACE (AND ONLY BEFORE SUCH EXCHANGE), OR THE NATIONAL ASSOCIATION OF SECURITIES DEALERS, INC.

NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PRE-DISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION; WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMPASSED BY THE PUTATIVE CLASS ACTION UNTIL: (I) THE CLASS CERTIFICATION IS DENIED; (II) THE CLASS IS DECERTIFIED; OR (III) THE CUSTOMER IS EXCLUDED FROM THE CLASS BY THE COURT. SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN.

THE LAWS OF THE STATE OF NEW YORK GOVERN.

If any of the above Terms and Conditions are unacceptable to you, please notify Pershing immediately in writing by certified mail to Pershing at One Pershing Plaza, Jersey City, New Jersey 07399, Attention: Compliance Department.

Pershing LLC, member NASD, NYSE, SIPC. Pershing Investments LLC.

** TOTAL PAGE.08 **

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 14 AM 9:35
(Office Use Only)
MC

Thomas Jeffery Cole
(Full Name)

104 Briarwood Street Moore, OK 73160
(Mailing Address)

202.225.6165
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: OK District: 4	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑ No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true complete and correct to the best of my knowledge and belief.	Thomas J. Cole	5/13/04

SCHEDULE I - EARNED INCOME

Name Thomas Jeffery Cole

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Cole, Hargrave, Snodgrass, and Associates	Management Fee	$20,000
Cole, Hargrave, Snodgrass, and Associates	Deferred 2002 Income	$37,870.65

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	MAJOR ASSETS				
	Cole, Hargrave, Snodgrass, and Associates, OK City (stock)	$250,001 - $500,000	Dividends (management fee)	$15,001 - $50,000	
	Strategic Communications, Moore, OK (stock)	$100,001 - $250,000	Dividends	$15,001 - $50,000	
JT	Personal Residence, Moore, OK	$100,001 - $250,000	None	NONE	
JT	10 Acres, Johnson County, OK (with brother)	$1,001 - $15,000	None	NONE	
DC	Alliant Energy	$1 - $1,000	Dividends Capital Gains	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	SAVINGS / MONEY MARKET ACCOUNT				
JT	Mid First Bank, Money Market	$50,001 - $100,000	Interest	$1,001 - $2,500	
JT	Fidelity Spartan Money Market	$50,001 - $100,000	Interest	$1,001 - $2,500	
JT	Burke and Herbert Money Market	$15,001 - $50,000	Interest	$201 - $1,000	
SP	Bank One Money Market	$15,001 - $50,000	Interest	$1,001 - $2,500	
JT	Fidelity Municipal Money Market	$1,001 - $15,000	Interest	$201 - $1,000	
	401 K (CHS)				
	Credit Suisse Cap. Appreciation Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Franklin MSF Mutual Shares Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Franklin Small /Mid Cap Growth FD A	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	Franklin Balance Sheet Inv. Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	Franklin Income Fd A	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Lord Abbett Core Fixed Income	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Lord Abbett Mid Cap Value Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	MFS Value Fd A	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Oppenheimer Main St Fd Cls. A	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Oppenheimer Global Fund Class A	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	PIMCO High Yield Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Putnam International Equity Fund A	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	Strong Government Securities Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Templeton Foreign Fd A	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	Van Kemp Cam Stock Fd A	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	Scudder Technology Fd B	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	S
	Scudder Growth Fd B	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	S
	Scudder Aggressive Growth Fd B	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	S
	Scudder Premium Small Cap B	$15,001 - $50,000	Dividends Capital Gains	$1,001 - $2,500	S
	Scudder International Fd B	$1,001 - $15,000	Dividends Capital Gains	$1,001 - $2,500	S
	Scudder Growth and Income Fd B	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	MUTUAL FUNDS				
JT	Vanguard Tot. Bond Market Fund	$50,001 - $100,000	Dividends Capital Gains	$2,501 - $5,000	
JT	Fidelity Mortgage Sec. Fd	$15,001 - $50,000	Dividends Capital Gains	$1,001 - $2,500	
JT	Fidelity High Income Fd	$15,001 - $50,000	Dividends Capital Gains	$1,001 - $2,500	
JT	Columbia Real Estate Equity Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
JT	Am. Cent. Balanced Fd	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	T. Rowe Price Equity Income Fd	$50,001 - $100,000	Dividends Capital Gains	$201 - $1,000	
JT	Am. Century Value Fd	$15,001 - $50,000	Dividends Capital Gains	$1 - $200	
JT	Vanguard Total International St. Index	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	Fidelity Select Health Care	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Fidelity Dividend Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
JT	Fidelity Spartan 500 Index Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Vanguard Total St. Index Fd	$50,001 - $100,000	Dividends Capital Gains	$201 - $1,000	
JT	American Century International Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

JT	American Century Global Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Baran Asset Fund	$15,001 - $50,000	Dividends Capital Gains	NONE	
JT	American Century Ultra Fund	$15,001 - $50,000	Dividends Capital Gains	$1 - $200	
	STOCKS				
SP	Alliant Energy Corp Stock	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
JT	Merck Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	S
JT	Exxon Mobile Corp. Stock	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	Regions Financial Corp Stock	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	Duke Energy Corp Stock	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
JT	Pfizer Inc. Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
JT	Wells Fargo and Company Stock	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	Walgreen Corp. Stock	$1,001 - $15,000		$1 - $200	
JT	Wal-Mart Corp Stock	$1,001 - $15,000		$1 - $200	
JT	Kerr McGee Corp Stock	$1,001 - $15,000		$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

JT	Becton Dickinson Corp Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Johnson Controls Inc Stock	$15,001 - $50,000	Dividends Capital Gains	$201 - $1,000	
JT	IBM Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	SBC Communications Stock	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
JT	Equifax Inc. Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Microsoft Corp Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Hewlett Packard Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
JT	Dell Inc. Stock	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	Great Plains Airlines Stock	$1 - $1,000	Dividends	NONE	
	TOM COLE FIDELITY IRA				
	Fidelity Cash Reserves	$1 - $1,000	Interest	$1 - $200	
	Fidelity Diversified Internat'l Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	Fidelity Dividend Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
	Fidelity Spartan 500 Index Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	Fidelity Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	Fidelity Blue Chip Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	Fidelity Aggressive Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	SPOUSE'S FIDELITY 401 K				
SP	Fidelity Cash Reserves	$1 - $1,000	Interest	$1 - $200	
SP	Fidelity Diversified International Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Dividend Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	P
SP	Fidelity Spartan 500 Index Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Blue Chip Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Aggressive Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	TOM COLE 457 SOONER SAVINGS				
	T. Rowe Price Balanced Fd	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	EuroPacific Growth A Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	Am. Century Income and Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	Columbia Acorn 12 Fund	$1 - $1,000	Dividends Capital Gains	$1 - $200	
	Janus Small Cap Value Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	T. Rowe Price B 1 Chip Growth Fd	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	Dreyfus Premier New Leader A Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	Invesco Technology Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	BGIS&P Stock Fd	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	TOM COLE'S NY LIFE ANNUITY				
JT	Main Stay VP Capital Appreciation	$50,001 - $100,000	Dividends Capital Gains	$2,501 - $5,000	
	TOM COLE'S NY LIFE IRA				
	Main Stay VP Index Equity Fund	$1,001 - $15,000	Dividends Capital Gains	$1,001 - $2,500	
	Main Stay VP Growth Equity Fund	$1,001 - $15,000	Dividends Capital Gains	$1,001 - $2,500	
	Main Stay VP Value Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	Fidelity Equity Income Fund	$1,001 - $15,000	Dividends Capital Gains	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	Fidelity Contra Fund	$1,001 - $15,000	Dividends Capital Gains	$1,001 - $2,500	
	Alger America Small Cap Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	Janus World Wide Growth Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	SPOUSE'S NY LIFE IRA				
SP	Main Stay VP Cap Appreciation Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
SP	Main Stay VP Index Equity Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
SP	Main Stay VP Growth Equity Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
SP	Janus Balanced Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	RNC 401 K				
	Great West Aggressive Growth Fund	$15,001 - $50,000	Dividends Capital Gains	$1,001 - $2,500	S
	SPOUSE'S 401 K				
SP	Fidelity Cash Reserves	$1 - $1,000	Interest	$1 - $200	
SP	Fidelity Ginnie Mae Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Capital and Income Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

SP	Fidelity Diversified International Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
SP	Fidelity Spartan 500 Index Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Blue Chip Growth Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity OTC Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
SP	Fidelity Aggressive Growth Fund	$1 - $1,000	Dividends Interest	$1 - $200	
	FEDERAL THRIFT SAVINGS PLANS				
	G Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	I Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	F Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	C Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	S Fund	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	P
	STATE FARM ANNUITY				
	Tom Cole Insurance / Annuity	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	Spouse's Insurance Annuity	$1,001 - $15,000	Dividends Capital Gains	$201 - $1,000	
	SON'S MUTUAL FUND				
DC	Columbia Stein Roe Liberty Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
	SON'S IRA				
DC	Invesco Dynamics Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	
DC	Aim Large Cap Growth Fund	$1,001 - $15,000	Dividends Capital Gains	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Fidelity Dividend Growth Fund	P	1/15/03	$1,001 - $15,000
JT	Fidelity Spartan 500 Index Fund	P	1/15/03	$1,001 - $15,000
JT	Merck Stock	S	1/8/03	$1,001 - $15,000
JT	Pfizer Stock	P	1/30/03	$1,001 - $15,000
JT	SBC Communications Stock	P	1/13/03	$1,001 - $15,000
JT	Wells Fargo Inc. Stock	P	2/25/03	$1,001 - $15,000
SP	Fidelity Dividend Growth Fund	P	1/6/03	$1,001 - $15,000
	Fidelity Dividend Growth Fund	P	1/6/03	$1,001 - $15,000
	Federal Savings Thrift Plan G Fund	P	2/4/03	$1,001 - $15,000
	Federal Savings Thrift Plan G Fund	P	3/4/03	$1,001 - $15,000
	Federal Savings Thrift Plan G Fund	P	4/4/03	$1,001 - $15,000
	Federal Savings Thrift Plan G Fund	P	5/4/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Vanguard Total Bond Index Fund	P	1/6/03	$1,001 - $15,000
JT	Vanguard Total Bond Index Fund	P	2/20/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	1/6/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	5/22/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	6/12/03	$1,001 - $15,000
	Loomis Sayles Small Cap Liberty Acorn	S	6/18/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	6/24/03	$1,001 - $15,000
JT	Vanguard Total Bond Index Fund	P	6/24/03	$1,001 - $15,000
JT	T. Rowe Price Equity Income Fund	P	6/24/03	$1,001 - $15,000
JT	Regions Financial Corp Stock	P	6/25/03	$1,001 - $15,000
JT	Pfizer, Inc. Stock	P	6/26/03	$1,001 - $15,000
JT	Johnson Controls Stock	P	6/30/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Great West Aggressive Growth IRA	S	6/30/03	$15,001 - $50,000
JT	T. Rowe Price Equity Income Fund	P	7/31/03	$1,001 - $15,000
JT	Microsoft Stock	P	7/3/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	7/31/03	$1,001 - $15,000
JT	Vanguard Total Bond Market Fund	P	7/31/03	$1,001 - $15,000
	Scudder Technology B (CHS 401 K)	S	7/31/03	$1,001 - $15,000
	Scudder Growth B (CHS 401 K)	S	7/31/03	$1,001 - $15,000
	Scudder Aggressive Growth B	S	7/31/03	$1,001 - $15,000
	Dreman Scudder Small Cap Value B (CHS 401 K)	S	7/31/03	$15,001 - $50,000
	Scudder Growth and Income B (CHS 401 K)	S	7/31/03	$1,001 - $15,000
	Scudder International B (CHS 401 K)	S	7/31/03	$1,001 - $15,000
	Credit Suisse Capital Appreciation (CHS 401 K)	P	8/6/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Franklin MSF Mutual Shares (CHS 401 K)	P	8/06/03	$1,001 - $15,000
	Franklin Small / Mid Cap Growth A (CHS)	P	8/6/03	$1,001 - $15,000
	Franklin Balance Sheet Inv. A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Franklin Income Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Lord Abbett Core Fixed Income (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Lord Abbett Mid Cap Value A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	MFS Value Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Oppenheimer Global Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Oppenheimer Main St Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	PIMCO High Yield Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Putnam International Equity Fund A (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Strong Government Securities Fund (CHS 401 K)	P	8/6/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Templeton Foreign Fund a (CHS 401 K)	P	8/6/03	$1,001 - $15,000
	Van Kemp Comstock Fund (CHS 401 K)	P	8/6/03	$1,001 - $15,000
JT	Exxon Mobile Stock	P	10/16/03	$1,001 - $15,000
JT	Vanguard Total Bond Market Index Fund	P	10/16/03	$1,001 - $15,000
JT	Wal-Mart Stock	P	10/16/03	$1,001 - $15,000
JT	Wells Fargo Stock	P	10/21/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	11/13/03	$1,001 - $15,000
JT	Vanguard Total Stock Market Index Fund	P	12/26/03	$1,001 - $15,000
JT	Vanguard Total Bond Market Index Fund	P	12/26/03	$1,001 - $15,000
	Federal Thrift Savings Plan G Fund	P	10/1/03	$1,001 - $15,000
	Federal Thrift Savings Plan F Fund	P	10/1/03	$1,001 - $15,000
	Federal Thrift Savings Plan C Fund	P	10/1/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Federal Thrift Savings Plan S Fund	P	10/1/03	$1,001 - $15,000
	Federal Thrift Savings Plan I Fund	P	10/1/03	$1,001 - $15,000

SCHEDULE VI - GIFTS

Name Thomas Jeffery Cole

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Scott Howell, Dallas, Texas	Trip to United Kingdom for my spouse and myself (determination on personal friendship received from Committee on Standards), August 2003	$3000-$3500

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Thomas Jeffery Cole

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute (Conference on Global Warming)	May 26, 2003-June 1, 2003	Oklahoma City-Rome-Oklahoma City	Y	Y	Y	N

SCHEDULE VIII - POSITIONS

Name Thomas Jeffery Cole

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Fulbright Association (uncompensated)
Partner	Strategic Communications

SCHEDULE IX - AGREEMENTS

Name Thomas Jeffery Cole

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
4/20/03	Cole, Hargrave, Snodgrass, and Associates	Quarterly Management fee of $5,000 of Personal Business (Approved by Committee on Standards)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

35

LEGISLATIVE RESOURCE CENTER
2004 MAY 12 AM 9:09
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Michael Allen (Mac) Collins, Sr.
(Full Name)

189 Buttrill Road
Jackson, GA 30233
(Mailing Address)

202-225-5901
Daytime Telephone

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: GA District: Eighth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Michael A. Collins	5-11-04

Michael A. (Mac) Collins, Sr.
Name

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Collins Trucking Company, Inc. (family owned business)	advisor	$21,600
Collins Industries, Inc.	spouse salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B		Block C		Block D		Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP.	SP	Mega Corp Stock				X								X										X									P
DC, *Examples:*		Simon & Schuster			Indefinite															Royalties									X			
JT		1st Bank of Paducah, KY accounts					X									X										X						
		Cong.Federal Credit Union			X											X							X									
		Western Reserve (IRA)				X												N/A								N/A						
		Collins Trkg.Co.(Sub-S)							X					X													X					
		McIntosh State Bank			X											X							X									
		The Farm, Hwy 16E., Jackson, GA.(100 AC)						X										Farm Income						X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Michael A. (Mac) Collins, Sr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Lake Jackson Property	1 G	AC	X								X								P
	GA Power Co.Lease, Jackson, GA																			
	Personal Stock:																			
	Abiomed, Inc.							X				X								
	Cisco Systems, Inc.		X					X				X								
	Delta Airlines, Inc.		X					X					X							
	Home Depot, Inc.		X					X					X							
	Wal Mart		X					X					X							
	Putnam Growth Opportunities		X					X					X							
	Jackson Investment Club (1/15 ownership-SEE ATTACHMENT)																			

This page may be copied if more space is required.

Morgan Stanley

1099-DIV
TAX YEAR 2003
DIVIDENDS AND DISTRIBUTIONS

COPY B
FOR RECIPIENT

OMB.NO.:1545-0110

PAYER:
MORGAN STANLEY DW INC.
75 VARICK STREET
NEW YORK, NY 10013
IDENTIFICATION NUMBER: 94-1671384

SBWNJGWH
00699008 2 AT 9.547 02 TR 8737 -000
MAC COLLINS
189 BUTTRILL ROAD
JACKSON GA 30233-5461

565

Account Number
565 012843 028

Federal Tax ID
254-68-1620

Customer Service
(800) 869-3326

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

The following dividend information is reported to the IRS by payer. When preparing your income tax return you should list payer information separately as shown below.

Payer	1a. Total Ordinary Dividends	1b. Qualified Dividends	2a. Total Capital Gain Distributions	2b. Post-May 5 Capital Gain Distributions	2c. Qualified 5-year Gains	2d. Unrecap Section 1250 Gain	3. Nontaxable Distributions	4. Federal Income Tax Withheld	6. Foreign Tax Paid	7. Foreign Country or US Posses	8. Cash Liquidation Distributions
Morgan Stanley DW Inc. PAYER'S FED. ID. # 94-1671384	65.50	65.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00

There is no reportable information for Boxes 2e, 2f, 5 and 9; these Boxes are therefore not shown above.

888

IMPORTANT TAX INFORMATION - PLEASE RETAIN FOR YOUR RECORDS

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

1099-DIV DETAIL
TAX YEAR 2003

MAC COLLINS
189 BUTTRILL ROAD

Account Number
565 012843 028

DETAIL OF DIVIDENDS AND DISTRIBUTIONS

Payer/Pay Date	Ordinary Dividends	Qualified Dividends	Capital Gain Distributions	Post-May 5 Capital Gain Distributions	Qualified 5-year Gains	Unrecaptured Section 1250 Gain	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid	Cash Liquidation Distributions
MORGAN STANLEY DW INC.										
DELTA AIRLINES										
03/01/03	2.50	2.50								
06/01/03	2.50	2.50								
HOME DEPOT INC										
03/27/03	6.00	6.00								
06/26/03	6.00	6.00								
09/18/03	7.00	7.00								
12/18/03	7.00	7.00								
WAL MART STORES INC										
01/06/03	7.50	7.50								
04/07/03	9.00	9.00								
07/07/03	9.00	9.00								
10/14/03	9.00	9.00								
Total	60.50	60.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION - PLEASE RETAIN FOR YOUR RECORDS

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

ACTIVE ASSETS ACCOUNT®

FOR YEAR ENDING DECEMBER 31, 2003

Your Financial Advisor
LARRY DERANEY
FIRST VICE PRESIDENT
MORGAN STANLEY
5400 RIVERSIDE DRIVE, SUITE 200
MACON, GA 31210
(478) 405-2800

00134802 2 AT 0.547 02 TR 964 -000
MAC COLLINS
189 BUTTRILL ROAD
JACKSON GA 30233-5461

565

Account Number
565 012843 028

AAA Customer Service
1-800-869-3326
Householding Anniv. Date:
10/25/2002

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Assets
Money Market Funds	$0.00	0.0%
Stocks	15,300.40	49.8
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	15,448.18	50.2
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$30,748.58	100.0%
Cash	-44.37	
Total Asset Value	$30,704.21	

Income Summary

	Year To Date
Money Market Funds	$0.00
Stocks	65.50
Municipal Bonds	0.00
Corporate Fixed Income	0.00
Government Securities	0.00
Mutual Funds	0.00
Unit Investment Trusts	0.00
Certificates of Deposit	0.00
Other	0.00
Total Income	$65.50
Taxable Income	$65.50
Tax Exempt Income	$0.00

Activity Summary

Total Asset Value January 01, 2003		$24,097.00
Cash/Money Market Activity for 2003		
Credits To Your Account		
Dividend and Interest	65.50	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	0.00	
Total Credits	65.50	
Debits To Your Account		
Checking	0.00	
Debit Card	0.00	
Withdrawals	0.00	
Funds to Purchase Securities	0.00	
Other Debits	-100.00	
Total Debits	-100.00	
Changes in Asset Value for 2003		
Value of Priced Assets 1/01/03	$24,106.87	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	6,641.71	
Value of Priced Assets 12/31/03	30,748.58	
Net Change in Asset Value		6,641.71
Total Asset Value as of December 31 2003		$30,704.21

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

MAC COLLINS
189 BUTTRILL ROAD

Account Number
565 012843 028

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	-44.57	---	---
Total Cash and Money Market Funds	-844.57		0
Net Change Since January 1, 2003	-44.50		

Annualized 30 Day Yields

Active Assets Money Trust.....0.68%
Active Assets Govt. Sec. Tr.....0.51%
Active Assets California Tax Free.....0.44%
Active Assets Tax Free Trust.....0.57%
Active Assets Insured Account..... 0.54%
Active Assets Deposit Account..... 0.54%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
60	ABIOMED INC	6.99	419.40	1.4%	0	0.00%	ABMD	
200	CISCO SYS INC	24.23	4,846.00	16.8%	0	0.00%	CSCO	
100	DELTA AIRLINES	11.81	1,181.00	3.8%	10	.84%	DAL	
100	HOME DEPOT INC	55.49	5,549.00	11.5%	28	.78%	HD	Next Dividend Payable 03/04
100	WAL MART STORES INC	53.05	5,305.00	17.5%	36	.67%	WMT	Next Dividend Payable 01/02/04
Total Stocks			$15,800.40	49.8%	$74	.48%		
Net Change Since January 1, 2003			$5,799.00					

Mutual Funds		Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds									
711.152	PUTNAM GROWTH OPPORTUNITIES A	12.8200	9,116.97	29.7%	N/A	N/A		PGOAX	Reinv/Reinv

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 2003

MAC COLLINS
189 BUTTRILL ROAD

Account Number
565 012843 028

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds								
517.679 PUTNAM GROWTH OPPORTUNITIES B	12.2300	6,331.21	20.5%	N/A	N/A		POGBX	Reinv/Reinv
Total Mutual Funds		$15,648.18	50.2%	N/A	N/A			
Net Change Since January 1, 2003		$3,842.71						

Asset Summary	Value	Est Yrly Income
Total Asset Value	$30,774.21	$74
Total Net Change In Priced Assets Since January 1, 2003	$6,641.71	

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Activity	Description	Amount	Income Category
Dividend	DELTA AIRLINES	5.00	Stocks
Dividend	HOME DEPOT INC	26.00	Stocks
Dividend	WAL MART STORES INC	34.50	Stocks
	Total Stocks	$65.50	
	Total Dividends and Interest	$65.50	
Total Credits To Your Account		$65.50	

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

MAC COLLINS
189 BUTTRILL ROAD

Account Number
585 012843 028

DEBITS TO YOUR ACCOUNT

Other Debits

Date	Activity	Description	Amount	Additional Information
10-02	Charge	AAA ANNUAL SERVICE FEE	-100.00	
		Total Other Debits	-100.00	
		Total Debits To Your Account	-100.00	

ADDITIONAL ACCOUNT INFORMATION

Securities Received

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-21	Class Exchange	711.152	PUTNAM GROWTH OPPORTUNITIES A			
			Total Securities Received		0.00	

Securities Delivered

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-21	Class Exchange	745.395	PUTNAM GROWTH OPPORTUNITIES B			
			Total Securities Delivered		0.00	

Messages

Please note that sell trades executed, checks written and debit card transactions made in 2003, and which settle early in 2004, will be reflected as 2003 transactions under the Assets, Checking and Debit Card sections of the Activity Details portion of the statement.

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 2003

Your Financial Advisor
LARRY DERANEY
FIRST VICE PRESIDENT
MORGAN STANLEY
5400 RIVERSIDE DRIVE, SUITE 200
MACON, GA 31210
(478) 405-2800

MAC COLLINS
189 BUTTRILL ROAD
JACKSON GA 30233-5461

Account Number
565 012843 028

AAA Customer Service
1-800-869-3326
Householding Anniv. Date:
10/25/2002

Access Your Account at:
www.morganstanley.com/online

GAIN AND LOSS SUMMARY

The Gain and Loss Information is provided for informational purposes only. We recommend that you contact your tax advisor to determine the appropriate information to be used in the preparation of your tax return. This Gain and Loss Summary is not a substitute 1099 form (or any other appropriate tax form) and should not be filed with your taxes.

For most securities purchased after 1985 through Morgan Stanley DW Inc., the necessary data, including cost basis (purchase price), is provided to estimate gain or loss. Please note that although Morgan Stanley DW Inc. makes every effort to adjust the cost basis for such securities' capital changes, it does not adjust the cost basis for all events, including amortization of non-municipal bond premiums; exercise of stock options; securities deemed to have been sold and simultaneously repurchased; receipt of cash in lieu of fractional shares; or the net effect of wash sales and/or short sales against the box.

For securities not purchased through Morgan Stanley DW Inc., for example, securities purchased elsewhere and later transferred to it, you will need to supply the relevant information either to your Financial Advisor or directly onto ClientServ, independently of Morgan Stanley DW Inc. In either case, it is your responsibility to ensure the accuracy of this information, since Morgan Stanley DW Inc. has no knowledge of such assets' cost basis. To correct any information supplied by Morgan Stanley DW Inc., please inform your Financial Advisor; to correct any information supplied by you, you may either inform your Financial Advisor or input the data directly yourself through ClientServ.

For Managed Futures funds, these funds may typically be redeemed only once monthly, at the fund's final net asset value ("NAV") as of each month's end. The fund's final NAV for each month - and therefore the exact amount of any investor's gain or loss realized that month- becomes available, however, only midway into the following month. Separately, all unrealized gain and loss figures are only estimates. Morgan Stanley DW Inc. does not guarantee nor will it independently verify the accuracy of the information in the Gain and Loss Summary.

Unrealized Gain/(Loss)	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information
Stocks							
Common Stocks							
ABIOMED INC	60	10-03-00	35.4110	2,124.66	419.40	(1,705.26)	Long Term
CISCO SYS INC	200	01-03-00	54.0530	10,810.60 P	4,846.00	(5,964.60)	Long Term ADJUSTED 09/28/00

This summary is not part of your account statement. It is for information purposes only and should not be used for tax preparation.

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 2003

MAC COLLINS
189 BUTTRILL ROAD

Account Number
565 012843 028

Unrealized Gain/(Loss)	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information
DELTA AIRLINES	100	01-03-00	51.7180	5,171.80 P	1,181.00	(3,990.80)	Long Term ADJUSTED 09/28/00
HOME DEPOT INC	100	01-03-00	65.9680	6,596.80 P	3,549.00	(3,047.80)	Long Term ADJUSTED 09/28/00
WAL MART STORES INC	50	01-03-00	68.6230	3,431.15 P	2,652.50	(778.65)	Long Term ADJUSTED 09/28/00
	50	03-09-00	49.8550	2,492.75 P	2,652.50	159.75	Long Term ADJUSTED 09/28/00
	100		59.2390	5,923.90	5,305.00	(618.90)	
Mutual Funds							
Other Mutual Funds							
PUTNAM GROWTH OPPORTUNITIES A	711.152	09-22-00		please provide	9,116.97		
PUTNAM GROWTH OPPORTUNITIES B	186.114	09-22-00		please provide	2,276.17		
	331	04-05-01	15.0800	4,991.48	4,048.12	(943.36)	Long Term
	.565	04-05-01	15.0796	8.52	6.92	(1.60)	Long Term
	517.679			N/A	6,331.21	N/A	
Totals for positions with cost data available				[illegible]	[illegible]	[illegible]	
Total Market Value for all positions					[illegible]		

P - You have provided the trade history for this transaction; it was not available through Morgan Stanley DW Inc. records.

The "Total Cost" and "Unit Cost" for Fixed Income Unit Trusts, Mortgage-Backed Securities, and Zero Coupon Bonds has been adjusted to reflect any partial return of principal or capital that may have been paid to you, or accreted interest earned, since your purchase date. In the event that the accumulated total return of principal or capital is greater than the provided original cost, the adjusted cost will be "0.00".

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MAC COLLINS
189 BUTTRILL ROAD

Account Number
565 012843 028

Summary

	Short Term	Long Term	Total
Unrealized gain	$0.00	$159.75	$159.75
Unrealized (loss)	$0.00	($16,432.07)	($16,432.07)
Realized gain YTD	$0.00	$0.00	$0.00
Realized (loss) YTD	$0.00	$0.00	$0.00

3

6511

SCHEDULE K-1 (Form 1065)
Department of the Treasury Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.
For calendar year 2003 or tax year beginning , and ending

OMB No. 1545-0099
2003

Partner's identifying number ▶ 254-68-1620

Partner's name, address, and ZIP code

MICHAEL COLLINS
PO BOX 617
JACKSON GA 30233

Partnership's identifying number ▶ 58-6050076

Partnership's name, address, and ZIP code

JACKSON INVESTMENT CLUB
333 SOUTH HARKNESS STREET
JACKSON, GA 30233

A This partner is a [X] general partner [ ] limited partner
[ ] limited liability company member

B What type of entity is this partner? ▶ INDIVIDUAL

C Is this partner a [X] domestic or a [ ] foreign partner?

D Enter partner's percentage of:

	(i) Before change or termination	(ii) End of year
Profit sharing	%	6.6600000%
Loss sharing	%	6.6600000%
Ownership of capital	%	6.6600000%

E IRS Center where partnership filed return: OGDEN, UT

F Partner's share of liabilities:
Nonrecourse $
Qualified nonrecourse financing $
Other $ 0.

G Tax shelter registration number ▶

H Check here if this partnership is a publicly traded partnership as defined in section 469(k)(2) [ ]

I Check applicable boxes: (1) [ ] Final K-1 (2) [ ] Amended K-1

J Analysis of partner's capital account:

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
			( )	

	(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Income (Loss)	1 Ordinary income (loss) from trade or business activities	1	0.	See page 6 of Partner's Instructions for Schedule K-1 (Form 1065).
	2 Net income (loss) from rental real estate activities	2		
	3 Net income (loss) from other rental activities	3		
	4 Portfolio income (loss):			
	a Interest income	4a		Form 1040, line 8a
	b (1) Qualified dividends	4b(1)	187.	Form 1040, line 9b
	(2) Total ordinary dividends	4b(2)	188.	Form 1040, line 9a
	c Royalty income	4c		Sch. E, Part I, line 4
	d (1) Net short-term capital gain (loss) (post-May 5, 2003)	4d(1)	1040.	Sch. D, line 5, col. (g)
	(2) Net short-term capital gain (loss) (entire year)	4d(2)	807.	Sch. D, line 5, col. (f)
	e (1) Net long-term capital gain (loss) (post-May 5, 2003)	4e(1)	<1407.>	Sch. D, line 12 col. (g)
	(2) Net long-term capital gain (loss) (entire year)	4e(2)	<3608.>	Sch. D, line 12, col (f)
	f Other portfolio income (loss) (attach schedule)	4f		See pages 6 and 7 of Partner's Instructions for Schedule K-1 (Form 1065).
	5 Guaranteed payments to partner	5		
	6 a Net section 1231 gain (loss) (post-May 5, 2003)	6a		
	b Net section 1231 gain (loss) (entire year)	6b		
	7 Other income (loss) (attach schedule)	7		
Deductions	8 Charitable contributions (attach schedule)	8		Sch. A, line 15 or 16
	9 Section 179 expense deduction	9		See page 8 of Partner's Instructions for Schedule K-1 (Form 1065).
	10 Deductions related to portfolio income (attach schedule) STMT	10	81.	
	11 Other deductions (attach schedule)	11		
Credits	12 a Low-income housing credit: (1) From section 42(j)(5) partnerships	12a(1)		Form 8586, line 5
	(2) Other than on line 12a(1)	12a(2)		
	b Qualified rehabilitation expenditures related to rental real estate activities	12b		See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	c Credits (other than credits shown on lines 12a and 12b) related to rental real estate activities	12c		
	d Credits related to other rental activities	12d		
	13 Other credits	13		

JWA For Paperwork Reduction Act Notice, see Instructions for Form 1065. Schedule K-1 (Form 1065) 2003

311151
01-07-04

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6512

	(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Investment Interest	14 a Interest expense on investment debts	14a		Form 4952, line 1
	b (1) Investment income included on lines 4a, 4b(2), 4c, and 4f	14b(1)	1.	See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	(2) Investment expenses included on line 10	14b(2)	81.	
Self-employment	15 a Net earnings (loss) from self-employment	15a	0.	Sch. SE, Section A or B
	b Gross farming or fishing income	15b		See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	c Gross nonfarm income	15c		
Adjustments and Tax Preference Items	16 a Depreciation adjustment on property placed in service after 1986	16a		See pages 9 and 10 of Partner's Instructions for Schedule K-1 (Form 1065) and Instructions for Form 6251.
	b Adjusted gain or loss	16b		
	c Depletion (other than oil and gas)	16c		
	d (1) Gross income from oil, gas, and geothermal properties	16(d)1		
	(2) Deductions allocable to oil, gas, and geothermal properties	16(d)2		
	e Other adjustments and tax preference items (attach schedule)	16e		
Foreign Taxes	17 a Name of foreign country or U.S. possession ▶ VARIOUS			
	b Gross income from all sources	17b	994.	Form 1116, Part I
	c Gross income sourced at partner level	17c	32.	
	d Foreign gross income sourced at partnership level:			
	(1) Passive	17d(1)		
	(2) Listed categories (attach schedule)	17d(2)		
	(3) General limitation	17d(3)		
	e Deductions allocated and apportioned at partner level:			
	(1) Interest expense	17e(1)		
	(2) Other	17e(2)		
	f Deductions allocated and apportioned at partnership level to foreign source income:			
	(1) Passive	17f(1)		
	(2) Listed categories (attach schedule)	17f(2)		
	(3) General limitation	17f(3)		
	g Total foreign taxes (check one): ▶ [X] Paid [ ] Accrued	17g	2.	Form 1116, Part II
	h Reduction in taxes available for credit (attach schedule)	17h		Form 1116, line 12
Other	18 Section 59(e)(2) expenditures: a Type ▶			See page 10 of Partner's Instructions for Schedule K-1 (Form 1065).
	b Amount	18b		
	19 Tax-exempt interest income	19		Form 1040, line 8b
	20 Other tax-exempt income	20		See page 10 of Partner's Instructions for Schedule K-1 (Form 1065).
	21 Nondeductible expenses	21		
	22 Distributions of money (cash and marketable securities)	22		
	23 Distributions of property other than money	23		
	24 Recapture of low-income housing credit:			
	a From section 42(j)(5) partnerships	24a		Form 8611, line 8
	b Other than on line 24a	24b		
Supplemental Information	25 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed):			

JACKSON INVESTMENT CLUB 58-6050076

SCHEDULE K-1 DEDUCTIONS RELATED TO PORTFOLIO INCOME

DESCRIPTION	AMOUNT	PARTNER INSTRUCTIONS
PROFESSIONAL FEES	40.	
ACCOUNT MAINT FEES	7.	
MEETING EXPENSES	34.	
TOTAL TO SCHEDULE K-1, LINE 10	81.	

GEORGIA FORM 700 SCHEDULE K-1 EQUIVALENT	Partner's Georgia Information For Calendar Year 2003 or Fiscal Year Beginning _____, 2003; and Ending _____, _____.	2003

Partner's Name, Address and ZIP Code

MICHAEL COLLINS
PO BOX 617
JACKSON GA 30233

Partner Number 3

Partner's Social Security Number 254-68-1620

Resident [X] Nonresident [ ]
Amended Schedule K-1 [ ] Final Schedule K-1 [ ]

Partnership's Name, Address and ZIP Code

JACKSON INVESTMENT CLUB
333 SOUTH HARKNESS STREET
JACKSON, GA 30233

Partnership's Identifying Number 58-6050076

Partner's Percentage 6.6600000
Georgia Ratio 1.000000

Total Federal Income	<2613.>
ADDITIONS TO FEDERAL INCOME	
Non-Georgia state and municipal bond interest	
Non-Georgia net income or net profit taxes	
Expenses attributable to tax exempt income	
ACRS depreciation deduction on the federal return	
Other additions	
SUBTRACTIONS FROM FEDERAL INCOME	
Interest on U.S. Obligations	
Depreciation allowed per IR Code as of 1-1-81 (ACRS)	
Federal jobs credit from federal return	
Other subtractions	
Total Income For Georgia Purposes	<2613.>
Nonresident Partners:	
Income Allocated Everywhere	
Business income subject to apportionment	
Net business income apportioned to Georgia	
Net income allocated to Georgia	
Total Georgia Income	<2613.>
Georgia tax withheld	
Georgia business credits	

345391
05-01-03

SCHEDULE D (Form 1065)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1065.

OMB No 1545-0099

2003

Name of partnership: JACKSON INVESTMENT CLUB

Employer identification number: 58-6050076

Part I Short-Term Capital Gains and Losses - Assets Held 1 Year or Less

(a) Description of property (e.g., 100 shares of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5, 2003 gain or (loss) *(See below)
1 MORGAN STANLEY						
STATEMENT						
ATTACHED			8868.	12373.	<3505.>	
MORGAN STANLEY						
STATEMENT						
ATTACHED			63954.	48338.	15616.	15616.

2	Short-term capital gain from installment sales from Form 6252, line 26 or 37	2	
3	Short-term capital gain (loss) from like-kind exchanges from Form 8824	3	
4	Partnership's share of net short-term capital gain (loss), including specially allocated short-term capital gains (losses), from other partnerships, estates, and trusts	4	
5a	Combine lines 1 through 4 in column (g). Enter here and on Form 1065, Schedule K, line 4d(1)	5a	15616.
5b	**Net short-term capital gain or (loss).** Combine lines 1 through 4 in column (f). Enter here and on Form 1065, Schedule K, line 4d(2) or 7	5b	12111.

Part II Long-Term Capital Gains and Losses - Assets Held More Than 1 Year

(a) Description of property (e.g., 100 shares of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) for the entire year Subtract (e) from (d)	(g) Post-May 5, 2003 gain or (loss) *(See below)
6 MORGAN STANLEY						
STATEMENT						
ATTACHED			13515.	46582.	<33067.>	
MORGAN STANLEY						
STATEMENT						
ATTACHED			29079.	50198.	<21119.>	<21119.>

7	Long-term capital gain from installment sales from Form 6252, line 26 or 37	7	
8	Long-term capital gain (loss) from like-kind exchanges from Form 8824	8	
9	Partnership's share of net long-term capital gain (loss), including specially allocated long-term capital gains (losses), from other partnerships, estates, and trusts	9	
10	Capital gain distributions	10	
11	Combine lines 6 through 10 in column (g). Enter here and on Form 1065, Schedule K, line 4e(1) or 7	11	<21119.>
12	**Net long-term capital gain or (loss).** Combine lines 6 through 10 in column (f). Enter here and on Form 1065, Schedule K, line 4e(2) or 7	12	<54186.>

*Note: Include in column (g) all gains and losses from column (f) from sales, exchanges, or conversions (including installment payments received) after May 5, 2003. However, do not include gain attributable to unrecaptured section 1250 gain, a "collectibles gain or loss" (as defined on page 3) or the eligible gain on qualified small business stock (see page 3).

JWA **For Paperwork Reduction Act Notice, see the Instructions for Form 1065.**

Schedule D (Form 1065) 2003

311171
12-18-03

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 2003

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Unrealized Gain/(Loss)

	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information

P - You have provided the trade history for this transaction; it was not available through Morgan Stanley DW Inc. records.

The "Total Cost" and "Unit Cost" for Fixed Income Unit Trusts, Mortgage-Backed Securities, and Zero Coupon Bonds has been adjusted to reflect any partial return of principal or capital that may have been paid to you, or accreted interest earned, since your purchase date. In the event that the accumulated total return of principal or capital is greater than the provided original cost, the adjusted cost will be "0.00".

Realized Gain/(Loss)

	Quantity	Date Acquired	Date Sold	Adjusted Total Cost	Proceeds	Realized Gain/(Loss)	Additional Information
Short Term							
AMERN AXLE & MFG HLDGS INC	55	01-21-03	09-29-03	1,386.61	1,564.62	178.01	Short Term
AMERN AXLE & MFG HLDGS INC	40	01-21-03	09-29-03	1,008.44	1,137.91	129.47	Short Term
AMERN AXLE & MFG HLDGS INC	60	01-21-03	09-29-03	1,515.66	1,706.86	191.20	Short Term
AMERN AXLE & MFG HLDGS INC	40	01-21-03	09-29-03	1,010.44	1,137.91	127.47	Short Term
AMERN AXLE & MFG HLDGS INC	200	02-18-03	09-29-03	5,020.26	5,689.53	669.27	Short Term
AMERN AXLE & MFG HLDGS INC	45	02-18-03	09-29-03	1,129.56	1,280.15	150.59	Short Term
AMERN AXLE & MFG HLDGS INC	45	02-18-03	09-29-03	1,129.00	1,279.02	150.02	Short Term
AMERN AXLE & MFG HLDGS INC	155	02-18-03	09-29-03	3,890.70	4,405.52	514.82	Short Term
CHINA YUCHAI INT'L LIMITED	85	08-19-03	11-18-03	1,417.72	2,393.16	975.44	Short Term
CHINA YUCHAI INT'L LIMITED	115	08-19-03	11-18-03	1,920.95	3,237.81	1,316.86	Short Term
CHINA YUCHAI INT'L LIMITED	85	08-19-03	11-18-03	1,419.84	2,395.29	975.45	Short Term
DELTA AIRLINES	525	10-22-02	01-21-03	5,875.24	6,354.48	479.24	Short Term
DUKE ENERGY CORP	185	05-21-02	02-18-03	6,497.70	2,513.91	(3,983.79)	Short Term
I C O S CP	100	01-21-03	06-17-03	2,635.12	4,178.25	1,543.13	Short Term
PFIZER INC	35	12-17-02	07-22-03	1,127.75	1,106.91	(20.84)	Short Term
PFIZER INC	40	03-18-03	07-22-03	1,244.60	1,265.05	20.45	Short Term
THE INDIA FUND INC	400	10-21-03	12-16-03	7,328.41	8,410.23	1,081.82	Short Term
WIRELESS AGE COMM INC	800	11-18-03	12-16-03	2,897.56	3,693.18	795.62	Short Term
XM SATELLITE RADIO HLDG CL A	500	06-17-03	09-16-03	5,671.33	8,088.42	2,417.09	Short Term
XM SATELLITE RADIO HLDG CL A	250	07-22-03	11-18-03	3,292.07	5,404.65	2,112.58	Short Term
XM SATELLITE RADIO HLDG CL A	250	07-22-03	12-16-03	3,292.07	5,579.12	2,287.05	Short Term
Sub Total Short Term				$60,711.03	$72,821.98	$12,110.95	
Long Term							
AGERE SYS INC CL B	3	07-20-99	10-21-03	179.74	8.81	(170.93)	Long Term Adjusted 06/27/02
AGERE SYS INC CL B	49	10-19-99	10-21-03	1,863.22	143.90	(1,719.32)	Long Term Adjusted 06/27/02
AGERE SYSTEMS CLASS A	2	10-19-99	10-21-03	83.04	1.42	(81.62)	Long Term Adjusted 06/27/02

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Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 2003

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Realized Gain/(Loss)	Quantity	Date Acquired	Date Sold	Adjusted Total Cost	Proceeds	Realized Gain/(Loss)	Additional Information
AOL TIME WARNER	228	12-22-98	02-18-03	6,954.16	2,578.49	(4,555.67)	Long Term Adjusted 09/27/00
AOL TIME WARNER	400	01-19-99	02-18-03	15,298.00	4,172.78	(11,125.22)	Long Term Adjusted 09/27/00
AOL TIME WARNER	67	02-16-99	02-18-03	2,761.07	698.94	(2,062.13)	Long Term Adjusted 09/27/00
AOL TIME WARNER	105	02-16-99	04-22-03	4,327.05	1,315.62	(3,011.43)	Long Term Adjusted 09/27/00
AOL TIME WARNER	200	03-16-99	04-22-03	10,491.80	2,505.94	(7,985.86)	Long Term Adjusted 09/27/00
AOL TIME WARNER	195	12-18-01	04-22-03	6,770.39	2,443.29	(4,327.10)	Long Term
APPLERA CP-CELERA GENOMICS GP	10	01-18-00	10-21-03	1,157.58	103.33	(1,054.25)	Long Term Adjusted 09/28/00
BB & T CORP	25	08-21-01	10-21-03	1,004.17	846.45	(157.72)	Long Term
BIOGEN IDEC INC	.500	01-18-00	11-14-03	39.42	17.62	(21.80)	Long Term Adjusted 11/19/03
CHARLES SCHWAB NEW	200	06-18-02	09-16-03	2,545.54	2,207.41	(338.13)	Long Term
GREENMAN TECH INC	100	01-21-97	10-21-03	845.30	142.58	(702.72)	Long Term Adjusted 09/27/00
GREENMAN TECH INC	40	01-21-97	10-21-03	338.12	59.04	(279.08)	Long Term Adjusted 09/27/00
HUMAN GENOME SCIENCES INC	16	01-18-00	10-21-03	806.50	195.00	(611.50)	Long Term Adjusted 09/27/00
JOHNSON & JOHNSON	100	06-19-01	06-17-03	5,361.97	5,342.74	(19.23)	Long Term
JOHNSON & JOHNSON	75	06-19-01	08-19-03	4,021.48	3,696.24	(325.24)	Long Term
JOHNSON & JOHNSON	100	06-19-01	08-19-03	5,361.97	4,935.00	(426.97)	Long Term
LUCENT TECHNOLOGIES	14	07-20-99	10-21-03	837.60	30.90	(806.70)	Long Term Adjusted 10/13/00
LUCENT TECHNOLOGIES	184	10-19-99	10-21-03	8,682.54	410.47	(8,272.07)	Long Term Adjusted 10/13/00
NOKIA CP ADR	60	01-18-00	07-22-03	2,714.70	854.69	(1,860.01)	Long Term Adjusted 09/28/00
NOKIA CP ADR	300	12-18-01	07-22-03	7,886.44	4,273.45	(3,612.99)	Long Term
NOKIA CP ADR	40	06-18-02	07-22-03	546.84	569.79	22.95	Long Term
NOKIA CP ADR	100	06-18-02	07-22-03	1,372.10	1,424.48	52.38	Long Term
PFIZER INC	190	01-18-00	07-22-03	5,790.50	5,169.29	(621.21)	Long Term Adjusted 09/28/00
SYNOVUS FINCL	21	09-17-02	10-21-03	521.98	499.79	(22.19)	Long Term
VAXGEN INC	13	07-17-01	10-21-03	234.44	124.86	(109.58)	Long Term
Sub Total Long Term				$96,779.64	$42,594.32	($54,185.32)	
Totals for closing transactions with cost data available				[illegible]	$115,416.38	[illegible]	
Total Proceeds					$115,416.38		

This summary is not part of your account statement. It is for information purposes only and should not be used for tax preparation.

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

903

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR MONTH ENDING DECEMBER 31, 2003

Your Financial Advisor
LARRY DERANEY
FIRST VICE PRESIDENT
MORGAN STANLEY
5400 RIVERSIDE DRIVE, SUITE 200
MACON, GA 31210
(478) 405-2800

@BWNJGWN
00051403 4 AT 0.956 04 TR 632 -000
JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS
333 S HARKNESS ST 565
JACKSON GA 30233-1880

Account Number
565 012748 028

AAA Customer Service
1-800-869-3326
Householding Anniv. Date:
03/08/2003

Access Your Account at:
www.morganstanley.com/online

Asset Summary

	Value	% of Assets
Money Market Funds	$22,611.80	8.1%
Stocks	256,290.46	91.9
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$278,902.26	100.0%
Cash	0.00	
Total Asset Value	$278,902.26	

Income Summary

	This Month	Year-To-Date
Money Market Funds	$6.06	$13.82
Stocks	272.75	2,802.52
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	$278.81	$2,816.34
Taxable Income	$278.81	$2,816.34
Tax Exempt Income	$0.00	$0.00

Activity Summary

Total Asset Value November 30 2003		$268,531.81
Cash/Money Market Activity for December		
Closing Balance 11/30	$4,930.46	
Credits To Your Account		
Dividend and Interest	278.81	
Deposits	0.00	
Sales Proceeds/Redemptions	17,682.53	
Other Credits	0.00	
Total Credits	17,961.34	
Debits To Your Account		
Checking	0.00	
Debit Card	0.00	
Withdrawals	-275.00	
Funds to Purchase Securities	0.00	
Other Debits	-5.00	
Total Debits	-280.00	
Closing Balance 12/31	22,611.80	
Net Change Cash/Money Market Activity		17,681.34
Changes in Asset Value for December		
Value of Priced Assets 11/30	$263,601.35	
Securities Bought	0.00	
Securities Received	0.00	
Securities Sold/Redeemed	-17,682.53	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	10,371.64	
Value of Priced Assets 12/31	256,290.46	
Net Change in Asset Value		-7,310.89
Total Asset Value as of December 31 2003		$278,902.26

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
ACTIVE ASSETS MONEY TRUST	22,611.80	8.1%	153
Total Cash and Money Market Funds	$22,611.80	8.1%	$153
Net Change Since Last Statement	$17,681.54		

Annualized 30 Day Yields

Active Assets Money Trust.....0.68%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
100	AMERN AXLE & MFG HLDGS INC	40.42	4,042.00	1.4%	0	0.00%	AXL	
10	AMGEN INC	61.79	617.90	0.2%	0	0.00%	AMGN	
200	AUTHENTIDATE HLDG CORP	11.90	2,380.00	0.9%	0	0.00%	ADAT	
11	BIOGEN IDEC INC	36.70	403.70	0.1%	0	0.00%	BIIB	
1,000	CHINA UNICOM LTD ADS	9.34	9,340.00	3.3%	121	1.29%	CHU	
1,000	CISCO SYS INC	24.23	24,230.00	8.7%	0	0.00%	CSCO	
300	COPYTELE INC	.46	138.00	N/A	0	0.00%	COPY	
61	EBAY INC	60.61	3,961.21	1.4%	0	0.00%	EBAY	
425	EXXON MOBIL CORP	41.00	17,425.00	6.2%	425	2.43%	XOM	Next Dividend Payable 03/04
20	GENENTECH INC	93.57	1,871.40	0.7%	0	0.00%	DNA	
655	GENERAL ELECTRIC CO	30.98	20,291.90	7.3%	524	2.58%	GE	Next Dividend Payable 01/26/04
1,350	HOME DEPOT INC	35.49	47,911.50	17.2%	378	.78%	HD	Next Dividend Payable 03/04
1,000	INTEL CORP	32.05	32,050.00	11.5%	80	.24%	INTC	Next Dividend Payable 03/04
600	ISHARES MSCI HONG KONG IND FD	10.00	6,000.00	2.2%	90	1.51%	EWH	Next Dividend Payable 01/02/04
1,050	ISHARES MSCI JAPAN INDEX FUND	9.64	10,122.00	3.6%	2	.02%	EWJ	Next Dividend Payable 01/02/04
310	JDS UNIPHASE CORP	3.64	1,128.40	0.4%	0	0.00%	JDSU	
1,600	MICROSOFT CORP	27.37	43,792.00	15.7%	256	.58%	MSFT	Next Dividend Payable 11/04
3,400	SIRIUS SATELLITE RADIO INC	3.16	10,744.00	3.9%	0	0.00%	SIRI	
100	SUNTRUST BKS	71.50	7,150.00	2.6%	180	2.51%	STI	Next Dividend Payable 03/04
100	TARGET CORPORATION	38.40	3,840.00	1.4%	28	.72%	TGT	Next Dividend Payable 03/04
119	UNITED PARCEL SERVICE INC CL-B	74.55	8,871.45	3.2%	119	1.34%	UPS	Next Dividend Payable 01/05/04
Total Stocks			$255,790.46	91.9%	$2,205	.8%		
Net Change Since Last Statement			[illegible]					

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Asset Summary

	Value	Est Yrly Income
Total Asset Value	$278,902.26	$2,857
Total Net Change in Priced Assets Since Last Statement	-7,310.03	

Authorized Limit

Your Authorized Limit equals:

22,611.00	*Money Market Trust balance*
.00 +	*cash balance*
.00 +	*loan amount available to you based on a percent of the assets in your margin account (identified by asterisk)*
.00 -	*debit balance*
$22,611.00	Authorized Limit

Morgan Stanley Margin Loan Rates

Loan Amount	Rate
$0 - 9,999	7.875%
$10,000 - 24,999	7.750%
$25,000 - 49,999	6.750%
$50,000 - 99,999	6.625%
$100,000 - 499,999	5.375%
$500,000 - 999,999	4.875%
$1,000,000 & over	4.500%

EFFECTIVE DATE: July 8, 2003
PREVIOUS CHANGE: May 15, 2003

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
Taxable Income				
12-01	Dividend	INTEL CORP	20.00	Stocks
12-10	Dividend	TARGET CORPORATION	7.00	Stocks
12-10	Dividend	EXXON MOBIL CORP	106.25	Stocks
12-15	Dividend	SUNTRUST BKS	45.00	Stocks
12-18	Dividend	HOME DEPOT INC	94.50	Stocks
12-31	Dividend	ACTIVE ASSETS MONEY TRUST	6.06	Money Market Funds
		Total Taxable Income	278.81	
		Total Dividends and Interest	278.81	

See Income Summary on page 1 for the month-to-date and year-to-date amounts per income category.

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Sales Proceeds/Redemptions

Trade Date	Settle Date	Activity	Quantity	Description	Price	Amount	Additional Information
12-16	12-19	Sold	400	THE INDIA FUND INC	21.5400	8,410.25	
12-16	12-19	Sold	800	WIRELESS AGE COMM INC	4.8600	3,693.18	
12-16	12-19	Sold	250	XM SATELLITE RADIO HLDG CL A	25.0000	5,579.12	
				Total Sales Proceeds/Redemptions		$17,682.55	Year-To-Date $115,418.30

Total Credits To Your Account $17,961.34 Year-To-Date $125,259.87

DEBITS TO YOUR ACCOUNT

Withdrawal

Date	Activity	Description	Amount	Additional Information
12-16	Check	FUNDS PAID	275.00	
		Total Withdrawals	-275.00	Year-To-Date -515.00

Other Debits

Date	Activity	Description	Amount	Additional Information
12-16	Charge	BRANCH CHECK FEE	-5.00	
		Total Other Debits	-5.00	Year-To-Date -106.00

Total Debits To Your Account -280.00 Year-To-Date -102,665.36

ADDITIONAL ACCOUNT INFORMATION

Money Market

Date	Activity	Description	Amount	Additional Information
		Closing Balance 11/30	$4,930.46	
12-02	Automatic Investment	ACTIVE ASSETS MONEY TRUST	20.00	
12-11	Automatic Investment	ACTIVE ASSETS MONEY TRUST	113.25	
12-16	Automatic Redemption	ACTIVE ASSETS MONEY TRUST	-230.00	
12-17	Automatic Redemption	ACTIVE ASSETS MONEY TRUST	-5.00	
12-19	Automatic Investment	ACTIVE ASSETS MONEY TRUST	94.50	
12-22	Automatic Investment	ACTIVE ASSETS MONEY TRUST	17,682.53	

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JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Money Market

Date	Activity	Description	Amount	Additional Information
12-31	Automatic Reinvestment	ACTIVE ASSETS MONEY TRUST	6.06	Dividend Reinvested
[redacted]				

Open Orders

Order Date	Activity	Number of Shares	Description	Order Price	Current Price	Additional Information
Open Orders as of December 31 2003						
11-18	Buy	100	AMERN AXLE & MFG HLDGS INC	34	40.42	EXPIRES 02/16/04
Open Order Activity during December 2003						
12-16	Cancel Sell	250	XM SATELLITE RADIO HLDG CL A	19		STOP

Tax Information

	This Month	Year-to-Date		This Month	Year-to-Date
Reportable Gross Proceeds	17,682.53	115,416.30	Foreign Tax Paid	.00	22.77

The tax information provided above should be used only as a guide; a complete 1099 will be sent to you.

Messages

Consolidated Statement of Financial Condition (in thousands of dollars): As of 11/30/03, Morgan Stanley DW Inc. had net capital of $1,058,302 which exceeded the SEC's minimum requirement of $101,154. A copy of the Morgan Stanley DW Inc. Consolidated Statement of Financial Condition as of 11/30/03 will be available after Feb 17, 2004 and can be either mailed to you at no cost by calling toll free 1(866)279-4498 or accessed online at http://www.morganstanley.com/aboutfir/shareholder/MorganStanleyDWInc.pdf.

See accompanying Perspectives newsletter for annual disclosure statement for all accounts with margin privileges.

For information about how the Jobs and Growth Tax Relief Reconciliation Act of 2003 may affect your assets and be reported for you by Morgan Stanley, please visit www.morganstanley.com/online or contact your Financial Advisor.

Your Financial Advisor
LARRY DERANEY
FIRST VICE PRESIDENT
MORGAN STANLEY
5400 RIVERSIDE DRIVE, SUITE 200
MACON, GA 31210
(478) 405-2800

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS
333 S HARKNESS ST
JACKSON GA 30233-1880

Account Number
565 012748 028

AAA Customer Service
1-800-869-3326
Householding Anniv. Date:
03/08/2003

Access Your Account at:
www.morganstanley.com/online

GAIN AND LOSS SUMMARY

The Gain and Loss information is provided for informational purposes only. We recommend that you contact your tax advisor to determine the appropriate information to be used in the preparation of your tax return. This Gain and Loss Summary is not a substitute 1099 form (or any other appropriate tax form) and should not be filed with your taxes.

For most securities purchased after 1985 through Morgan Stanley DW Inc., the necessary data, including cost basis (purchase price), is provided to estimate gain or loss. Please note that although Morgan Stanley DW Inc. makes every effort to adjust the cost basis for such securities' capital changes, it does not adjust the cost basis for all events, including amortization of non-municipal bond premiums; exercise of stock options; securities deemed to have been sold and simultaneously repurchased; receipt of cash in lieu of fractional shares; or the net effect of wash sales and/or short sales against the box.

For securities not purchased through Morgan Stanley DW Inc., for example, securities purchased elsewhere and later transferred to it, you will need to supply the relevant information either to your Financial Advisor or directly onto ClientServ, independently of Morgan Stanley DW Inc. In either case, it is your responsibility to ensure the accuracy of this information, since Morgan Stanley DW Inc. has no knowledge of such assets' cost basis. To correct any information supplied by Morgan Stanley DW Inc., please inform your Financial Advisor; to correct any information supplied by you, you may either inform your Financial Advisor or input the data directly yourself through ClientServ.

For Managed Futures funds, these funds may typically be redeemed only once monthly, at the fund's final net asset value ("NAV") as of each month's end. The fund's final NAV for each month - and therefore the exact amount of any investor's gain or loss realized that month- becomes available, however, only midway into the following month. Separately, all unrealized gain and loss figures are only estimates. Morgan Stanley DW Inc. does not guarantee nor will it independently verify the accuracy of the information in the Gain and Loss Summary.

Unrealized Gain/(Loss)	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information
Stocks							
Common Stocks							
AMERN AXLE & MFG HLDGS INC	100	11-18-03	38.0910	3,809.10	4,042.00	232.90	Short Term
AMGEN INC	10	01-18-00	74.0500	740.50 P	617.90	(122.60)	Long Term ADJUSTED 09/27/00

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JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Unrealized Gain/(Loss)

	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information
AUTHENTIDATE HLDG CORP	200	11-18-03	14.6367	2,927.34	2,380.00	(547.34)	Short Term
BIOGEN IDEC INC	11	01-18-00	75.2690	827.96 P	403.70	(424.26)	Long Term ADJUSTED 09/27/00
CHINA UNICOM LTD ADS	1,000	09-16-03	7.7717	7,771.71	9,340.00	1,568.29	Short Term
CISCO SYS INC	38	01-19-99	26.6460	1,012.55 P	920.74	(91.81)	Long Term ADJUSTED 09/28/00
	240	02-22-00	63.6410	15,273.84 P	5,815.20	(9,458.64)	Long Term ADJUSTED 09/28/00
	10	03-21-00	74.0250	740.25 P	242.30	(497.95)	Long Term ADJUSTED 09/28/00
	325	05-16-00	62.9840	20,469.80 P	7,874.75	(12,595.05)	Long Term ADJUSTED 09/28/00
	300	05-22-01	23.9858	7,195.75	7,269.00	73.25	Long Term
	50	06-19-01	18.3032	915.16	1,211.50	296.34	Long Term
	37	10-16-01	17.4043	643.96	896.51	252.55	Long Term
	1,000		46.2513	46,281.31	24,230.00	(22,021.31)	
COPYTELE INC	300	09-08-00		please provide	138.00		
EBAY INC	61	09-16-03	55.3983	3,379.30	3,941.21	561.91	Short Term
EXXON MOBIL CORP	425	04-16-02	42.9591	18,257.64	17,425.00	(832.64)	Long Term
GENENTECH INC	20	12-21-99	26.1000	522.00 P	1,871.40	1,349.40	Long Term ADJUSTED 09/27/00
GENERAL ELECTRIC CO	240	12-21-99	13.6800	3,283.20 P	7,435.20	4,152.00	Long Term ADJUSTED 09/27/00
	60	11-21-00	51.4610	3,087.66	1,858.80	(1,228.86)	Long Term
	25	03-19-02	41.8648	1,046.62	774.50	(272.12)	Long Term
	100	06-18-02	31.2926	3,129.26	3,098.00	(31.26)	Long Term
	200	07-22-03	28.0825	5,616.50	6,196.00	579.50	Short Term
	30	07-22-03	28.2490	847.47	929.40	81.93	Short Term
	655		25.9705	17,010.71	20,291.90	3,281.19	
HOME DEPOT INC	1,000	09-08-00		please provide	35,490.00		

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Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR MONTH ENDING DECEMBER 31, 2003

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Unrealized Gain/(Loss)

	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information
HOME DEPOT INC	350	08-20-02	31.6698	11,084.11	12,421.50	1,337.39	Long Term
	1,350			N/A	47,911.50	N/A	
INTEL CORP	640	09-08-00		please provide	20,512.00		
	10	10-17-00	39.4230	394.23	320.50	(73.73)	Long Term
	100	02-20-01	34.9824	3,498.26	3,205.00	(293.24)	Long Term
	250	05-22-01	30.9948	7,748.71	8,012.50	263.79	Long Term
	1,000			N/A	32,050.00	N/A	
ISHARES MSCI HONG KONG IND FD	600	10-21-03	10.6188	6,371.33	6,000.00	(371.33)	Short Term
ISHARES MSCI JAPAN INDEX FUND	500	08-19-03	8.4106	4,205.34	4,820.00	614.66	Short Term
	50	10-21-03	9.9382	496.91	482.00	(14.91)	Short Term
	500	10-21-03	9.9480	4,974.02	4,820.00	(154.02)	Short Term
	1,050		9.2154	9,676.27	10,122.00	445.73	
JDS UNIPHASE CORP	210	07-18-00	115.4820	24,251.22 P	764.40	(23,486.82)	Long Term
	100	02-20-01	37.6459	3,764.59	364.00	(3,400.59)	ADJUSTED 09/27/00 Long Term
	310		90.3735	28,015.81	1,128.40	(26,887.41)	
MICROSOFT CORP	1,330	09-08-00		please provide	36,402.10		
	74	03-20-01	28.5801	2,114.93	2,025.38	(89.55)	Long Term
	60	04-17-01	31.4945	1,889.67	1,642.20	(247.47)	Long Term
	136	11-20-01	33.9477	4,616.89	3,722.32	(894.57)	Long Term
	1,600			N/A	43,792.00	N/A	
SIRIUS SATELLITE RADIO INC	2,400	06-17-03	1.9980	4,795.28	7,584.00	2,788.72	Short Term
	1,000	10-21-03	2.6697	2,669.75	3,160.00	490.25	Short Term
	3,400		2.1955	7,465.03	10,744.00	3,278.97	
SUNTRUST BKS	100	05-21-02	70.0100	7,001.00	7,150.00	149.00	Long Term
TARGET CORPORATION	100	06-18-02	40.3842	4,038.42	3,840.00	(198.42)	Long Term
UNITED PARCEL SERVICE INC CL-B	119	04-22-03	60.2989	7,175.57	8,871.45	1,695.88	Short Term
Totals for positions with cost data available				$202,587.78	$163,748.36	($38,839.42)	
Total Market Value for all positions					$256,290.46		

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JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Unrealized Gain/(Loss)

	Quantity	Date Acquired	Unit Cost	Adjusted Total Cost	Market Value	Unrealized Gain/(Loss)	Additional Information

P - You have provided the trade history for this transaction; it was not available through Morgan Stanley DW Inc. records.

The "Total Cost" and "Unit Cost" for Fixed Income Unit Trusts, Mortgage-Backed Securities, and Zero Coupon Bonds has been adjusted to reflect any partial return of principal or capital that may have been paid to you, or accreted interest earned, since your purchase date. In the event that the accumulated total return of principal or capital is greater than the provided original cost, the adjusted cost will be "0.00".

Realized Gain/(Loss)

	Quantity	Date Acquired	Date Sold	Adjusted Total Cost	Proceeds	Realized Gain/(Loss)	Additional Information
Short Term							
AMERN AXLE & MFG HLDGS INC	55	01-21-03	09-29-03	1,386.61	1,564.62	178.01	Short Term
AMERN AXLE & MFG HLDGS INC	40	01-21-03	09-29-03	1,008.44	1,137.91	129.47	Short Term
AMERN AXLE & MFG HLDGS INC	60	01-21-03	09-29-03	1,515.66	1,706.86	191.20	Short Term
AMERN AXLE & MFG HLDGS INC	40	01-21-03	09-29-03	1,010.44	1,137.91	127.47	Short Term
AMERN AXLE & MFG HLDGS INC	200	02-18-03	09-29-03	5,020.26	5,689.53	669.27	Short Term
AMERN AXLE & MFG HLDGS INC	45	02-18-03	09-29-03	1,129.56	1,280.15	150.59	Short Term
AMERN AXLE & MFG HLDGS INC	45	02-18-03	09-29-03	1,129.00	1,279.02	150.02	Short Term
AMERN AXLE & MFG HLDGS INC	155	02-18-03	09-29-03	3,890.70	4,405.52	514.82	Short Term
CHINA YUCHAI INT'L LIMITED	85	08-19-03	11-18-03	1,417.72	2,393.16	975.44	Short Term
CHINA YUCHAI INT'L LIMITED	115	08-19-03	11-18-03	1,920.95	3,237.81	1,316.86	Short Term
CHINA YUCHAI INT'L LIMITED	85	08-19-03	11-18-03	1,419.84	2,395.29	975.45	Short Term
DELTA AIRLINES	525	10-22-02	01-21-03	5,875.24	6,354.48	479.24	Short Term
DUKE ENERGY CORP	185	05-21-02	02-18-03	6,497.70	2,513.91	(3,983.79)	Short Term
I C O S CP	100	01-21-03	06-17-03	2,635.12	4,178.25	1,543.13	Short Term
PFIZER INC	35	12-17-02	07-22-03	1,127.75	1,106.91	(20.84)	Short Term
PFIZER INC	40	03-18-03	07-22-03	1,244.60	1,265.05	20.45	Short Term
THE INDIA FUND INC	400	10-21-03	12-16-03	7,328.41	8,410.23	1,081.82	Short Term
WIRELESS AGE COMM INC	800	11-18-03	12-16-03	2,897.56	3,693.18	795.62	Short Term
XM SATELLITE RADIO HLDG CL A	500	06-17-03	09-16-03	5,671.33	8,088.42	2,417.09	Short Term
XM SATELLITE RADIO HLDG CL A	250	07-22-03	11-18-03	3,292.07	5,404.65	2,112.58	Short Term
XM SATELLITE RADIO HLDG CL A	250	07-22-03	12-16-03	3,292.07	5,579.12	2,287.05	Short Term
Sub Total Short Term				$60,711.03	$72,821.98	$12,110.95	
Long Term							
AGERE SYS INC CL B	3	07-20-99	10-21-03	179.74	8.81	(170.93)	Long Term Adjusted 06/27/02
AGERE SYS INC CL B	49	10-19-99	10-21-03	1,863.22	143.90	(1,719.32)	Long Term Adjusted 06/27/02
AGERE SYSTEMS CLASS A	2	10-19-99	10-21-03	83.04	1.42	(81.62)	Long Term Adjusted 06/27/02

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Morgan Stanley

ACTIVE ASSETS ACCOUNT®

FOR MONTH ENDING DECEMBER 31, 2003

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
565 012748 028

Realized Gain/(Loss)	Quantity	Date Acquired	Date Sold	Adjusted Total Cost	Proceeds	Realized Gain/(Loss)	Additional Information
AOL TIME WARNER	228	12-22-98	02-18-03	6,934.16	2,378.49	(4,555.67)	Long Term
AOL TIME WARNER	400	01-19-99	02-18-03	15,298.00	4,172.78	(11,125.22)	Adjusted 09/27/00 Long Term
AOL TIME WARNER	67	02-16-99	02-18-03	2,761.07	698.94	(2,062.13)	Adjusted 09/27/00 Long Term
AOL TIME WARNER	105	02-16-99	04-22-03	4,327.05	1,315.62	(3,011.43)	Adjusted 09/27/00 Long Term
AOL TIME WARNER	200	03-16-99	04-22-03	10,491.80	2,505.94	(7,985.86)	Adjusted 09/27/00 Long Term
AOL TIME WARNER	195	12-18-01	04-22-03	6,770.39	2,443.29	(4,327.10)	Adjusted 09/27/00 Long Term
APPLERA CP-CELERA GENOMICS GP	10	01-18-00	10-21-03	1,159.56	105.33	(1,054.23)	Long Term
BB & T CORP	25	08-21-01	10-21-03	1,004.17	866.45	(137.72)	Adjusted 09/28/00 Long Term
BIOGEN IDEC INC	.500	01-18-00	11-14-03	39.42	17.62	(21.80)	Long Term
CHARLES SCHWAB NEW	200	06-18-02	09-16-03	2,545.54	2,207.41	(338.13)	Adjusted 11/19/03 Long Term
GREENMAN TECH INC	100	01-21-97	10-21-03	845.30	142.58	(702.72)	Long Term
GREENMAN TECH INC	40	01-21-97	10-21-03	338.12	59.04	(279.08)	Adjusted 09/27/00 Long Term
HUMAN GENOME SCIENCES INC	16	01-18-00	10-21-03	806.50	195.00	(611.50)	Adjusted 09/27/00 Long Term
JOHNSON & JOHNSON	100	06-19-01	06-17-03	5,561.97	5,542.74	(19.23)	Adjusted 09/27/00 Long Term
JOHNSON & JOHNSON	75	06-19-01	08-19-03	4,021.48	3,696.24	(325.24)	Long Term
JOHNSON & JOHNSON	100	06-19-01	08-19-03	5,561.97	4,955.00	(426.97)	Long Term
LUCENT TECHNOLOGIES	14	07-20-99	10-21-03	837.60	30.90	(806.70)	Long Term
LUCENT TECHNOLOGIES	186	10-19-99	10-21-03	8,682.54	410.47	(8,272.07)	Adjusted 10/13/00 Long Term
NOKIA CP ADR	60	01-18-00	07-22-03	2,714.70	854.69	(1,860.01)	Adjusted 10/13/00 Long Term
NOKIA CP ADR	300	12-18-01	07-22-03	7,886.44	4,273.45	(3,612.99)	Adjusted 09/28/00 Long Term
NOKIA CP ADR	40	06-18-02	07-22-03	546.84	569.79	22.95	Long Term
NOKIA CP ADR	100	06-18-02	07-22-03	1,572.10	1,424.48	52.58	Long Term
PFIZER INC	100	01-18-00	07-22-03	3,790.50	3,169.29	(621.21)	Long Term
SYNOVUS FINCL	21	09-17-02	10-21-03	521.98	499.79	(22.19)	Adjusted 09/28/00 Long Term
VAXGEN INC	13	07-17-01	10-21-03	234.44	124.86	(109.58)	Long Term
Sub Total Long Term				$96,779.64	$42,594.32	($54,185.32)	
Totals for closing transactions with cost data available				$157,490.67	$115,416.30	($42,074.37)	
Total Proceeds					$115,416.30		

This summary is not part of your account statement. It is for information purposes only and should not be used for tax preparation.

Investments and services are offered through Morgan Stanley DW Inc., member SIPC

Morgan Stanley

ACTIVE ASSETS ACCOUNT®
FOR MONTH ENDING DECEMBER 31, 2003

JACKSON INVESMENT CLUB
ATTENTION: C/O HARRY LEWIS

Account Number
585 012748 028

Summary

	Short Term	Long Term	Total
Unrealized gain	$8,614.04	$7,873.72	$16,487.76
Unrealized (loss)	($1,087.60)	($54,239.58)	($55,327.18)
Realized gain YTD	$16,115.58	$75.33	$16,190.91
Realized (loss) YTD	($4,004.63)	($54,260.65)	($58,265.28)

Investments and services are offered through Morgan Stanley DW Inc., member SIPC.

SCHEDULE IV — TRANSACTIONS

Michael A. (Mac) Collins, Sr.
Name

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	B $15,001–$50,000	C $50,001–$100,000	D $100,001–$250,000	E $250,001–$500,000	F $500,001–$1,000,000	G $1,000,001–$5,000,000	H $5,000,001–$25,000,000	I $25,000,001–$50,000,000	J Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
SP	Lake Jackson property,GA Power Lease Co.	X			12-29-03				X						

This page may be copied if more space is required.

Name: Michael A. (Mac) Collins, Sr.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	McIntosh State Bank, Jackson, GA	Mortgage on Lake Jackson Proper				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name: Michael A. [illegible]

Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Assn. of American Railroads	Jan.18-20	Atl-Ft.Lauderdale-Atl	Y	Y	Y	N
	GA Beer Wholesalers Assn.	June 21-22	Atl-Biloxi-Atl	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Georgia Forestry Association
Advisor	Collins Trucking Company, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 JUN 15 PM 3:19

(Office Use Only)

John Conyers, Jr.
(Full Name)
2426 Rayburn House office Bldg
(Mailing Address)
Washington, D.C. 20515
Daytime Telephone 202-225-5126

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Conyers Jr.	6 15 04

Name	John Conyers, Jr.	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Detroit Board of Education	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name John Conyers, Jr | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
N/A			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name John Conyers, Jr. Page 4 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A Asset and/or Income Source		Block B Value of Asset	Block C Type of Income	Block D Amount of Income	Block E Transaction
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock		X	DIVIDENDS X	IV $1,001 – $2,500	P
	Simon & Schuster		Indefinite	Royalties	IX $100,001 – $1,000,000	
	1st Bank of Paducah, KY accounts		X	INTEREST X	VI $5,001 – $15,000	
	Congress. Fed. Credit Union		X	X	X	
	Congr. Fed. Credit Union					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Conyers, Jr

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	N/A																													

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SCHEDULE IV — TRANSACTIONS

Name John Conyers, Jr. | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	N/A														

This page may be copied if more space is required.

Name John Conyers, Jr. Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Thrift Savings Plan	Personal		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Wall Street Project	1/14 - 1/17	Detroit - New York - Detroit	Y	Y	N	N
	University of Idaho	2/19-2/21	Las Vegas - Spokane - Kansas City MO	Y	Y	N	N
	Pennvalley Community College	2/21-2/22	Kansas City, MO - Wash. DC	Y	Y	N	N
	Recording Academy	2/23 - 2/24	Wash. DC - New York - Wash. DC	Y	Y	N	N
	State University of New York	3/28 - 3/29	Chicago - New York	Y	Y	N	N
	Miami Community Law Group	8/18 - 8/19	Huntington NY - Miami - Detroit	Y	Y	N	N
	University of Chicago	10/24 - 10/25	Detroit - Chicago - Detroit	Y	Y	N	N
	Campaign for A National Healthy Program Now	12/7 - 12/8	Detroit - NY - Wash. DC	Y	Y	N	N

This page may be copied if more space is required.

Name John Conyers, Jr | Page 9 of 9

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
15
LEGISLATIVE RESOURCE CENTER
2004 JUN 15 AM 9:53
MC
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

James H.S. ("Jim") Cooper
(Full Name)

2319 Woodmont Blvd. Nashville, TN 37215
(Mailing Address)

(615) 255-4546
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: TN District: 05	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. Cooper	6/15/04

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SCHEDULE I - EARNED INCOME

Name James H S ("Jim") Cooper

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Assistive Technology Group, Naperville, IL	Director Fees (earned in 2002 and mistakenly not paid until 2003)	$1,000
Cornell Companies, Inc., Houston, TX	Director Fees (earned in 2002 and not paid until 2003)	$8,294

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name James H S ("Jim") Cooper

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
David Lipscomb University, Nashville, TN	Commencement Speech	May 10, 2003	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James H.S ("Jim") Cooper

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Adam's Properties, Gulfport, MS, 1504 Beach Drive, rental house	$15,001 - $50,000	RENT	$1 - $200	
	Assistive Technology Company stock, wheelchair distributor, Naperville, IL	$50,001 - $100,000	CAPITAL GAINS	NONE	P
	ATT stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Berkshire Hathaway stock	$50,001 - $100,000	CAPITAL GAINS	NONE	
	Brentwood Capital Advisors, LLC, member interest, investment bank, Brentwood, TN	$15,001 - $50,000	Return of Capital	$15,001 - $50,000	E

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James H.S ("Jim") Cooper

	Centennial Money Market shares	$250,001 - $500,000	INTEREST	$1,001 - $2,500	S
	Coca Cola stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Congressional Credit Union checking and savings accounts	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
	Comcast New A stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Cooper Bros. Partnership, farm land and lots, Shelbyville, TN and Smith Mills, KY (see attached schedule for details)	$500,001 - $1,000,000	Partnership Income	$15,001 - $50,000	E
	Cornell Companies stock	$1,001 - $15,000	CAPITAL GAINS	NONE	S
	DNP (Duff & Phelps) Select Income shares	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	EDT Learning Co. Stock	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Essent Health Care stock, hospital company, Nashville, TN	$50,001 - $100,000	CAPITAL GAINS	NONE	
	Federated GNMA Institutional shares	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Fidelity Contrafund shares	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Fidelity Growth and Income shares	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Fidelity Municipal Money Market shares	$15,001 - $50,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James H S ("Jim") Cooper

	Fifth Third Bank	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	General Electric stock	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Hamilton Fairfax, LLC, Nashville, TN, 2106 Fairfax, apartment building	$100,001 - $250,000	Partnership Income	$5,001 - $15,000	
	Harpeth Green Partnership, Brentwood, TN, real estate, Heritage Way	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
	Harpeth Green Properties, LLC, Brentwood, TN, Heritage Retirement Center, Heritage Way	$100,001 - $250,000	Partnership Income	$1 - $200	
	Hewlett Packard stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	IBM stock	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Intel stock	$50,001 - $100,000	DIVIDENDS	$1 - $200	
	Lennox International stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Merck stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
	MHS Diabetes Direct stock, diabetic supplies, Mt. Juliet, TN	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Microsoft stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Morgan Stanley Liquid Asset Fund	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James H S ("Jim") Cooper

	Nortel stock	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Pfizer stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	S
	Phoenix Companies stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	PLC Properties LLC, Brentwood, TN, Murray Lane and Virginia Way, undeveloped land	$250,001 - $500,000	Partnership Income	$100,001 - $1,000,000	S
	PNL Nashville LLC, Nashville, TN, Due West Blvd., Memorial Hospital Property	$100,001 - $250,000	CAPITAL GAINS	$50,001 - $100,000	S
	Procter and Gamble stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Qualcomm stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Select Medical stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	S
	Small Town Cable Partners, cable TV company, Brentwood, TN	$15,001 - $50,000	CAPITAL GAINS	NONE	
	South Pointe Venture Partners, L.P., venture fund, Palo Alto, CA	$1,001 - $15,000	CAPITAL GAINS	$15,001 - $50,000	S
	SunTrust Bank checking account	$1,001 - $15,000	INTEREST	$201 - $1,000	
	SunTrust Bank stock	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James H.S. ("Jim") Cooper

	Thoma Cressey Friends Funds VI and VII, venture capital funds, Chicago, IL	$100,001 - $250,000	CAPITAL GAINS	$5,001 - $15,000	PS
	TIAA-CREF	$15,001 - $50,000	INTEREST/CAPITAL GAINS	$2,501 - $5,000	
	Wachovia stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name James H S. ("Jim") Cooper

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Brentwood Capital Advisors, LLC, member interest, investment bank, Brentwood, TN	E	6/1/03 Return of Capital	$15,001 - $50,000
	Cornell Companies stock	S	1/03/03	$100,001 - $250,000
	PNL Nashville LLC, Nashville, TN, Due West Blvd., Memorial Hospital Property	S	7/1/03	$15,001 - $50,000
	Select Medical stock (distribution from Thoma Cressey Friends Fund VI)	S	8/20/03	$1,001 - $15,000
	Thoma Cressey Friends Funds VI and VII, venture capital funds, Chicago, IL	P	7/22/03 9/02/03 1/24/03 Capital Calls	$50,001 - $100,000
	Centennial Money Market shares	S	01/08/03 08/21/03	$50,001 - $100,000
	ATT Wireless Services stock	S	01/06/03	$1,001 - $15,000
	Merck stock	S	01/06/03	$1,001 - $15,000
	Assistive Technology Group, Inc.	P	05/14/03	$1,001 - $15,000
	Pfizer stock	S	1/06/03	$15,001 - $50,000
	PLC Properties LLC, Brentwood, TN, Murray Lane and Virginia Way undeveloped land (sold property on Murray Lane)	S	6/1/03	$100,001 - $250,000

SCHEDULE IV - TRANSACTIONS

Name James H S. ("Jim") Cooper

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	South Pointe Venture Partners, L.P., Palo Alto, CA (one of the companies, Psychiatric Solutions, went public)	S	6/1/03	$15,001 - $50,000
	Cooper Bros. Partnership, farm land and lots, Shelbyville, TN and Smith Mills, KY (see footnote for details)	E	6/03 and 11/03	$100,001 - $250,000

SCHEDULE VI - GIFTS

Name James H.S. ("Jim") Cooper

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Mr. Dennis Donigan, Kings Lane, Nashville, TN	Selected meats from Munn & Tillman butcher, briefcase, keychain light	$300

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name James H.S. ("Jim") Cooper

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Heritage Foundation	Jan. 13-14	Nashville-Baltimore-Nashville	Y	Y	N	0
Public Goverance Institute-Annenberg Foundation	Feb. 28-Mar. 2	Wash., D.C.-White Sulphur Springs, W.VA-Washington, DC	Y	Y	Y	0
Thomas Cressey Equity Partners	April 21-22	Nashville-Phoenix-Nashville	Y	Y	N	0
The Business Roundtable	May 1-2	Wash., D.C.-New York-Nashville	Y	Y	Y	0
New Democrat Network	May 16-May 17	Wash., D.C.-Williamsburg, VA-Nashville	Y	Y	N	0

SCHEDULE VIII - POSITIONS

Name James H.S. ("Jim") Cooper

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member	PLC Properties LLC
Member	Hamilton Fairfax LLC
Partner	Cooper Bros. Land Company
Partner	Harpeth Green Partnership
Limited Partner	Thoma Cressey Friends Funds VI and VII, L.P.
Limited Partner	Small Town Communications Partners I, L.P.
Limited Partner	South Pointe Venture Partners, L.P.
Limited Partner	The Discovery Fund, L.P.
Member	Harpeth Green Properties, LLC

FOOTNOTES

Name James H.S ("Jim") Cooper

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule I	When I was completing last year's Financial Disclosure form I checked with ATG about board meetings attended, and they had failed to record my presence at a 2002 board meeting. I told them to forget about it, but ATG made wrote the check anyway.	Assistive Technology Group, Naperville, IL
2	Schedule I	2002 Board Fee was paid in stock, not cash, and was 638 shares transferred to my brokerage account on July 30, 2003. Estimated current market value is $8,294. I know of no further compensation owed by Cornell, and was surprised that the company was so far behind in paying board fees.	Cornell Companies, Inc., Houston, TX
3	Schedule IV	Exercise of options from 4/11/02	Assistive Technology Group, Inc.
4	Schedule IV	Exchanged farm land in Bedford Co. For Lot 6A at 648 Grassmere Office Park, Trousdale Pke, Nashville, TN.	Cooper Bros. Partnership

James H.S. ("Jim") Cooper

2003 Financial Disclosure Statement
Supplementary Schedule

Schedule III

Cooper Brothers Partnership

Assets:

Located in or near Shelbyville, TN

- Lots at 1056 Madison Street
- Lot on Holland Street
- Lot on Depot Street
- Farm at 497 Shofner Bridge Road

Located in or near Smith Mills, KY (near Henderson, KY)

- Tweedy and Floyd Farms, Hwy. 266
- Utley Farms, Burbank Road
- Moet and Brahm Farms, Alzey-Uniontown Road
- Klondike Farm, Klondike Road

Located in Brentwood, TN

- Park Center Partnership I
- Park Center Partnership II

These partnerships were formed to develop the Gambro and LBMC Financial Center office buildings on Virginia Way in Maryland Farms

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

5

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 AM 9:42
U.S. HOUSE OF REPRESENTATIVES

MC

(Full Name) JERRY F. COSTELLO

(Mailing Address) 2608 PRO TOUR DRIVE
BELLEVILLE, IL 62220

Daytime Telephone: WM. B. SCHALIENBRAND - ACCOUNTANT (618) 398-4173

Filer Status: [X] Member of the U.S. House of Representatives — State: IL District: 12 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	X Jerry F. Costello	May 14, 2004

Name JERRY F. COSTELLO	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	STATE OF ILLINOIS	SPOUSE SALARY	N/A
	ST. CLAIR COUNTY	SPOUSE SALARY	N/A

... in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JERRY F. COSTELLO

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	*Examples:*	SP	Mega Corp. Stock					X								X																		P
DC			Simon & Schuster			Indefinite																Royalties									X			
JT			1st Bank of Paducah, KY accounts						X									X									X							
	WEST POINTE BANCORP, INC. STOCK - IRA							X								X									X									
SP	WEST POINTE BANCORP, INC. STOCK - IRA							X								X									X									
	PUTNAM INTERNATIONAL - NEW OPPORTUNITIES FUND CL A - IRA					X										X								X										
SP	PUTNAM INTERNATIONAL - NEW OPPORTUNITIES FUND CL A - IRA					X										X								X										
	BOSTON ADVISORS U S GOVT M/M FUND CL 1 - IRA					X										X								X										
SP	BOSTON ADVISORS U S GOVT M/M FUND CL 1 - IRA					X										X								X										

— additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JERRY F. COSTELLO

Page 4 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
		A None; C $1,001 – $15,000; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000	DIVIDENDS; RENT; INTEREST; EXCEPTED TRUST; EXCEPTED REAL ESTATE; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
	LORD ABBET MID CAPITAL VALUE FUND - CL - B - IRA	C: X	DIVIDENDS: X		
SP	LORD ABBET MID CAPITAL VALUE FUND - CL - B - IRA	C: X	DIVIDENDS: X		
	CONGRESSIONAL FEDERAL CREDIT UNION	C: X	INTEREST: X		
	AT&T WIRELESS GROUP STOCK		DIVIDENDS: X	I: X	
	STATE OF ILLINOIS		ILLINOIS RETIREMENT	I: X	
SP	STATE OF ILLINOIS	E: X	ILLINOIS TEACHER'S RETIREMENT	I: X	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
THE FAITH & POLITICS INSTITUTE (FACT FINDING)		MAR. 7 - 9	BELLEVILLE - MONTGOMERY, AL - BELLEVILLE	Y	Y	Y	N
ASSOCATION OF AMERICAN RAILROADS (CONFERENCE)		APR. 24-27	BELLEVILLE - PEBBLE BEACH, CA - BELLEVILLE	Y	Y	Y	N
INTERNATIONAL BROTHERHOOD OF TEAMSTERS (FACT FINDING)		NOV. 14-17	BELLEVILLE - CIUDAD JUAREZ, MEXICO -MEXICO CITY, MEXICO - WASHINGTON, D.C.	Y	Y	N	N

05/12/2004 16:52 FAX → DC OFFICE 006

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 4:54
(Office Use Only) MC

CHRISTOPHER COX
(Full Name)
2402 RAYBURN HOUSE OFFICE
(Mailing Address)
WASHINGTON, DC 20515
202-225-5611
Daytime Telephone:

Filer Status: [X] Member of the U.S. House of Representatives — State: CA District: 48 [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Chris Cox	MAY 14, 2004

Name CHRISTOPHER COX | Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	CONTINENTAL AIRLINES	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name CHRISTOPHER COX	Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NA			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $201 – $1,000; III $1,001 – $2,500; IV $2,501 – $5,000; V $5,001 – $15,000; VI $15,001 – $50,000; VII $50,001 – $100,000; VIII $100,001 – $1,000,000; IX $1,000,001 – $5,000,000; X Over $5,000,000; XI	P, S, E
SP, DC, JT — *Examples:* SP Mega Corp Stock		X	X		P
Simon & Schuster		Indefinite		Royalties	
1st Bank of Paducah, KY accounts		X	X	X	
SP IRA: SALOMON SMITH BARNEY SBOPX		X	X	X	P
SP IRA: FIDELITY MAGELLAN		X	X	X	
SP CONTINENTAL AIRLINES RETIRE.		X	X	X	
MFS INTERM. INC. FUND		X	X	X	
CALVERT TAX-FREE RESERVE		X	X	X	
AMERICAN EAGLE COINS		X	X	X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHRISTOPHER COX

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	CAPITAL GAINS BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	COCA-COLA COMMON STOCK			X										X								X										
	SMITH BARNEY CA MUNI MONEY MARKET								X					X												X						
	SCHWAB DIVIDEND EQUITY FUND						X														X											
	SMITH BARNEY S&P INDEX FUND							X						X								X										

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SCHEDULE IV — TRANSACTIONS

Name CHRISTOPHER COX

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	SCHWAB DIVIDEND EQUITY FUND	X			12·30·03				X						
JT	SMITH BARNEY S&P 500 INDEX FUND	X			7·16·03					X					
JT	SMITH BARNEY CA MUNI MONEY MARKET		X		12·30·03				X						
JT	SMITH BARNEY CA MUNI MONEY MARKET		X		7·16·03					X					

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Name CHRISTOPHER COX | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
			[redacted]	C $15,001–$50,000	[redacted]	E $100,001–$250,000	[redacted]	G $500,001–$1,000,000	[redacted]	I $5,000,001–$25,000,000	[redacted]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	THE CONGRESSIONAL INSTIT. ELECTED LEADERSHIP RET.	JAN 29-31	WASH, DC - ST. MICHAELS, MD - WASH, DC	Y	Y	N	
	THE PUBLIC GOVERNANCE INSTIT. BIPARTISAN RETREAT	FEB. 28-MAR. 2	WASH, DC - WHITE SULPHUR SPRINGS, WV - WASH, DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
ADVISORY BOARD	AIDS SERVICES FOUNDATION OF ORANGE COUNTY
TRUSTEE	CHAPMAN UNIVERSITY
NATIONAL ADVISORY BD.	CHILDHELP USA
ADVISORY COUNCIL	LAGUNA CANYON FOUNDATION
ADVISORY BOARD	UCI BRAIN IMAGING CENTER
BOARD MEMBER	NATIONAL ENDOWMENT FOR DEMOCRACY

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2000

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 2:55
MC
U.S. HOUSE OF REPRESENTATIVES

ROBERT EDWARD CRAMER, JR.
(Full Name)

417 EUSTIS AVENUE
(Mailing Address)

HUNTSVILLE, AL 35801

202/225-4801
Daytime Telephone

Filer Status: [X] Member of the U.S. House of Representatives — State: AL District: 05 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert E Cramer Jr.	5-13-04

Name ROBERT E. CRAMER, JR. Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	Transaction (P, S, E)
SP	*Examples:* Mega Corp. Stock	E ($50,001 – $100,000)	DIVIDENDS	IV ($1,001 – $2,500)	P
	Simon & Schuster	Indefinite	Royalties	IX ($100,001 – $1,000,000)	
	1st Bank of Paducah, KY accounts	F ($100,001 – $250,000)	INTEREST	VI ($5,001 – $15,000)	
	EASY STREET INVESTMENT CO. HUNTSVILLE, AL (ONE SHARE)	D ($15,001 – $50,000)	CAPITAL GAINS	IV ($1,001 – $2,500)	
	AL STATE EMPLOYEES DEFERRED INCOME ACCT. (NATIONWIDE FIXED ANNUITY MASS. FIXED ANNUITY)	D ($15,001 – $50,000)	CAPITAL GAINS	IV ($1,001 – $2,500)	
	1212 LOCUST AVE, HUNTSVILLE, AL	F ($100,001 – $250,000)	RENT	VI ($5,001 – $15,000)	

Value of Asset categories: A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000.

Type of Income categories: DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income).

Amount of Income categories: I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000.

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability							
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X					
	REGIONS MORTGAGE (HUNTSVILLE, AL)	MORTGAGE ON: 1212 LOCUST AVE, HUNTSVILLE, AL									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
AMERICAN ISRAEL EDUCATION FOUNDATION	AUG. 2-10	WASH., DC - ISRAEL - WASH. DC	Y	Y	N	N/A

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
HONORARY BOARD MEMBER	NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN (ALEXANDRIA, VIRGINIA)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2001 70-729 (mec)

Use additional sheets if more space is required.

BUD CRAMER
5TH DISTRICT
ALABAMA

COMMITTEE ON APPROPRIATIONS
SUBCOMMITTEES
COMMERCE, JUSTICE, STATE AND JUDICIARY
VA, HUD AND INDEPENDENT AGENCIES
DISTRICT OF COLUMBIA

PERMANENT SELECT COMMITTEE ON INTELLIGENCE
SUBCOMMITTEES
RANKING MEMBER,
TECHNICAL AND TACTICAL INTELLIGENCE
TERRORISM AND HOMELAND SECURITY
HUMAN INTELLIGENCE, ANALYSIS, AND COUNTERINTELLIGENCE

Congress of the United States
House of Representatives
Washington, D.C. 20515

OFFICES
2368 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, D.C. 20515
(202) 225-4801

828 CLINTON AVENUE WEST
HUNTSVILLE, AL 35801
(256) 551-0190

MORGAN COUNTY COURTHOUSE
BOX 668
DECATUR, AL 35602
(256) 355-9400

THE BEVILL CENTER
1011 GEORGE WALLACE BOULEVARD
TUSCUMBIA, AL 35674
(256) 381-3450

E-mail: Budmail@mail.house.gov
Web page: http://www.house.gov/cramer

(2)

May 25, 2004

House Legislative Counsel
U. S. House of Representatives
B-106 Cannon
Washington, DC 20515

MC

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

INSIDE MAIL

To Whom It May Concern:

After consultation with an attorney for the House Ethics Committee, I would like to offer an amendment to the Financial Disclosure Statement submitted on May 14, 2004. This amendment is for the purpose of disclosing the investment funds for Easy Street Investments, an investment club.

The attached summary states the holdings of the investment club.

Thank you for your consideration of this matter. If you should require additional information, please do not hesitate to contact me.

Sincerely,

Bud Cramer

Bud Cramer
Member of Congress

This mailing was prepared, published, and mailed at taxpayer expense
Printed on recycled paper with soy ink

WALL STREET INVESTORS P.O. Box 2347, Huntsville, Al 35804

% TOTAL INV.COST	# SHARES	TRADING STRAT *	SIGN	COMPANY	EXCHG	AVG. COST/SHR	TOTAL NET COST	MARKET 12/31/2003	VALUE SHARE	GAIN-(LOSS)
30.98%				MONEY MANAGER ACCOUNTS						
				Davis Selected - Large Cap #3590			100,000.00	121,857.54		21,857.54
				Wachovia MMFund #3584			100,000.00	113,541.46		13,541.46
				TCW Large Cap Growth #3590			185,000.00	122,926.36		(62,073.64)
							385,000.00	358,325.36		(26,674.64)
0.00%				CONTRACT SERVICES - Gov.						
1.62%				CONSUMER STAPLES						
	300	L	PEP	Pepsico, Inc.	NYSE	38.195	11,455.60	13,985.00	46.620	2,530.40
							11,455.60	13,985.00		2,530.40
1.34%				HEALTH CARE DIVERSE (Consumer Growth)						
	1,000	L	UNH	United Healthcare Corp.	NYSE	10.096	10,096.16	59,180.00	59.180	49,083.84
							10,096.16	59,180.00		49,083.84
5.71%				COMMUNICATIONS						
	400	L	CSCO	Cisco Systems, Inc.	NASDAQ	27.234	10,893.60	9,692.00	24.230	(1,201.40)
	898	L	Q	Qwest Communications Intl	NYSE	13.630	9,314.01	3,016.36	4.320	(6,496.65)
	1,900		NTOP	Net2Phone, Inc.	NASDAQ	6.440	9,849.88	10,200.00	5.900	590.12
	714	L	NXTL	NextTel (formerly DialPage)	NASDAQ	18.255	13,034.11	20,034.84	28.060	7 000.73
							43,131.40	42,942.20		(189.20)
3.71%				DRUGS (Consumer Growth)						
	250	L	ICOS	ICOS Corp	NASDAQ	42.241	10,560.13	10,320.00	41.280	(240.13)
	548	L	JNJ	Johnson & Johnson	NYSE	8.102	6,870.53	43,907.68	51.660	36,937.15
	300	L	PFE	Pfizer, Inc.	NYSE	35.311	10,593.40	10,599.00	35.330	5.60
							28,024.06	64,726.68		36,702.62
0.00%				CONSUMER CYCLICAL						
0.00%				Gaming/Entertainment						
15.79%				SEMI CONDUCTORS / ELECTRONICS/SOFTWARE						
	925	S	ATK	Alliant TechSystems, Inc	NASDAQ	51.939	27,105.06	38,324.00	57.780	3,218.94
	1,000	L	CYBS	CyberSource Corporation	NASDAQ	10.966	10,985.84	5,160.00	5.160	(5,825.84)
	2,000	L	MXIM	Maxim Integrated Products	NASDAQ	8.300	16,599.33	98,160.00	49.080	82,560.67
	1,000	S	SANM	Sanmina SCI Corp.	NASDAQ	3.788	3,788.05	12,600.00	12.600	8,813.95
	1,500	L	SUPX	Supertex	NASDAQ	24.077	36,115.68	28,875.00	19.250	(7,240.68)
	500	S	UTX	United Technologies Corp	NASDAQ	48.384	24,882.17	47,385.00	94.770	22,702.83
							119,274.11	223,504.00		104,229.99
0.00%				TRANSPORTATION						
5.75%				BASIC INDUSTRIAL						
	524	L	XOM	Exxon Mobile Corp	NYSE	32.707	17,289.30	21,848.00	41.700	4,378.70
	300	S	LOW	Lowes Companies, Inc.	NYSE	42.155	12,646.36	16,617.00	55.390	3,970.64
	2,800	L	VSTY.OB	Varsity Group, Inc.	NASDAQ	6.760	13,519.90	8,500.00	4.300	(4,019.90)
							43,455.56	46,965.00		3,429.44
15.23%				FINANCIAL SERVICES						
	1,000	L	FTN	First Tennessee National Corp	NYSE	21.693	21,692.50	44,100.00	44.100	22,407.50
	200	S	GS	Goldman Sachs Group, Inc.	NYSE	77.494	15,498.75	19,746.00	98.730	4,247.25
	500	S	LNC	Lincoln National Corp	NYSE	32.813	16,406.57	20,185.00	40.370	3,778.43
	500	S	PFG	Principal Financial Group	NYSE	29.269	14,624.86	16,935.00	33.870	1,910.14
	350	S	JOE	St Joe Company	NYSE	27.743	9,710.03	13,051.50	37.290	3,341.42
	750	L	SOTR	SouthTrust Corp	NYSE	28.209	21,156.80	24,885.00	32.748	3,328.40
	758	L	WPL	W P Stewart & Co LTD	NYSE	21.299	15,974.36	16,147.50	21.530	173.14
							113,063.72	154,320.00		39,256.28
100.00%							758,480.81	962,849.24		207,368.43

Wachovia Securities 12/31/2003 98,581.69

TOTAL CASH		98,581.69
DUES RECEIVABLE		
NET	12/31/2003	5,300.00

NET ASSET VALUE:

Market Value Securities	962,849.24
Cash	98 581 69
Dues Receivable - Net	5,300.00
Total Assets	1,066,730.93
@ 47 shares	
Net Asset Value Per Share	$ 22,696.40

% Invested	90.26%
% Cash & Receivables	9.74%
Total # stocks	25

INSIDE MAIL
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(18) MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Philip Miller Crane
(Full Name)

233 Cannon House Office Building Washington, DC 20515
(Mailing Address)

202-225-3711
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives State: IL District: 8 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Philip M. Crane	5/17/04

964

SCHEDULE I - EARNED INCOME

Name Philip Miller Crane

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Merrill Lynch IRA Account	IRA Distribution	$13,212
TIAA/CREF IRA Account	IRA Distribution	$3,547

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Philip Miller Crane

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
TIAA/CREF Retirement Account	$15,001 - $50,000	DIVIDENDS	$5,001 - $15,000	
Van Kampen Government Fund - IRA	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
Household Bank CDs - IRA	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
Allfirst Family CD - IRA	$15,001 - $50,000	DIVIDENDS		S
Providian CD - IRA	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
Davis Venture Mutual Fund - IRA	$50,001 - $100,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Philip Miller Crane

Enterprise Growth Fund - IRA	$15,001 - $50,000	DIVIDENDS	NONE	
Alliance International Fund - IRA	None		NONE	S
Alliance Premier Fund - IRA	None			S
Merrill Lynch Growth Fund - IRA	None		NONE	S
Merrill Lynch Core Principal Fund - IRA	$15,001 - $50,000		NONE	P
Merrill Lynch Large Capital Growth Fund - IRA	$15,001 - $50,000		NONE	P
Alliance Bernstein Value Fund - IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
Merrill Lynch bank account - IRA	$15,001 - $50,000	INTEREST	$1 - $200	
St. Clair County, Illinois, bond	None			S
Chicago, Illinois, bonds	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
Hoffman Estates, Illinois, bonds	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
Illinois Health Facilities bond	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
Kane County, Illinois, bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
Illinois Rural Bd bond	$15,001 - $50,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Philip Miller Crane

	Illinois State Cvc Ctr bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Skokie, Illinois, bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Illinois State First Ser Mbia bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	P
	Sangamon County, Illinois, bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	P
	ML money market account	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Congressional Credit Union	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	First Union Bank Account	$250,001 - $500,000	INTEREST	$5,001 - $15,000	
	Coin collection	$50,001 - $100,000		NONE	
	Nuveen Quality Fund	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	Nuveen Municipal Fund	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	MFS Municipal Income Trust	None			S
	Muni Intermediate Duration Fund	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	P
	Fountain County, Indiana, farm	$50,001 - $100,000	Farm income	$1,001 - $2,500	
	Hartford Annuity	$50,001 - $100,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Philip Miller Crane

	Bay Oaks Development Corp; interest in 400 acres of development property in McHenry, Illinois	$100,001 - $250,000		NONE
	Bay View Development Corp; interest in 130 acres of development property in McHenry, Illinois	$50,001 - $100,000	Distribution	$50,001 - $100,000
	Rental property: 1205 Howard Avenue, Nashville, Tennessee	$50,001 - $100,000		$5,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Philip Miller Crane

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Allfirst Family CD - IRA	S	2-18-03	$15,001 - $50,000
	Alliance International Fund - IRA	S	2-25-03	$1,001 - $15,000
	Alliance Premier Fund - IRA	S	2-25-03	$1,001 - $15,000
	Merrill Lynch Growth Fund - IRA	S	2-25-03	$15,001 - $50,000
	Alliance Bernstein Value Fund - IRA	P	2-26-03	$15,001 - $50,000
	Merrill Lynch Large Cap Growth Fund - IRA	P	2-26-03	$15,001 $50,000
	Merrill Lynch Core Principal Fund - IRA	P	2-26-03	$15,001 - $50,000
	Illinois State First Ser Mbia bond	P	2-25-03	$15,001 - $50,000
	Sangamon Cnty, Illinois, bond	P	2-25-03	$15,001 - $50,000
	MFS Municipal Income Trust	S	8-1-03	$15,001 - $50,000
	Muni Intermediate Duration Fund	P	8-2-03	$50,001 - $100,000
	St. Clair County, Illinois, bond came due	S	10-1-03	

SCHEDULE V - LIABILITIES

Name Philip Miller Crane

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Wells Fargo Home Mortgage, Inc.	Mortgage on 1205 Howard Ave., Nashville, Tennessee	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Philip Miller Crane

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Ripon Educational Fund	Aug. 9-15	Wash., D.C. -- London, U.K. -- Wash., D.C.	Y	Y	Y	N/A
The Inter-American Economic Council	Jan. 15 - 19	Wash, D.C. -- Antigua & Barbudas -- Barbados -- Wash., D.C.	Y	Y	Y	N/A
Chicago Board of Trade; Chicago Mercantile Exchange	March 13-16	Wash., D.C. -- Boca Raton, Florida -- Wash., D.C.	Y	Y	Y	N/A
ASAN Foundation	April 13 - 17	Wash., D.C. -- Seoul, South Korea	Y	Y	Y	N/A
Chinese International Economic Cooperation Assocation	April 17 - 21	Seoul, South Korea -- Taipei, Taiwan, Republic of China -- Wash., D.C.	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Philip Miller Crane

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Advisors	John M. Ashbrook Center for Public Affairs, Ohio
Board of Trustees	Hillsdale College, Michigan
Trustee	Intercollegiate Studies Institute, Delaware
National Steering Committee	Friends of the Milton and Rose D. Friedman Foundation, Indiana
Board of Trustees	Association of American Chambers of Commerce in Latin America, Washington, D.C.
Board of Trustees	Caribbean Latin American Action, Washington, D.C.

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(Office Use Only)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Alexander M Crenhaw
(Full Name)

4314 Ortega Forest Drive Jacksonville, FL 32210
(Mailing Address)

202-225-2501
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representative — State: FL District: 04 — ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) — ☐ Amendment — ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C app. 4, § 104 and U.S.C. § 1001)

Certification

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief

Signature of Reporting Individual: Alexander M Crenhaw

Date (Month, Day, Year): May 13, 2004

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Alexander M. Crenhaw

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Bank of America	$50,001 - $100,000	Dividends	$2,501 - $5,000	
Berkshire Hathaway Stock	$50,001 - $100,000	N/A	N/A	
Pepisco Inc.-Stock	$50,001 - $100,000	Dividends	$1,001 - $2,500	
Southern C. Stock	$15,001 - $50,000	Dividends	$1,001 - $2,500	
Alamo Storage Partners-(self storage-Dallas, TX)	$15,001 - $50,000	Rent	$2,501 - $5,000	
Direct Mail Systems, Inc.-Direct Mail, St. Pete, FL	$100,001 - $250,000	Dividends	$50,001 - $100,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Alexander M. Crenhaw

Aetna Growth & Income Fund-Deferred Compensation	$50,001 - $100,000	Dividends	N/A	
Templeton World Fund IRA	$15,001 - $50,000	Dividends	N/A	S
Trinity Fund Ltd., Investments, JAX., FL	$1,000,001 - $5,000,000	Partnership Income	$100,001 - $1,000,000	
Donaldson, Lufkin & Jenrette Alliance/Front Growth Fund	$100,001 - $250,000	Dividends	N/A	
Mutual Shares IRA	$1,001 - $15,000	Dividends	N/A	S
Evergreen Money Market	$15,001 - $50,000	Interest	$201 - $1,000	
Hough Tax Exempt	$1 - $1,000	INTEREST	$1 - $200	
Donaldson, Lufkin, Jenrette-IRA Self-directed Investments Listed Below				
Transocean SEDCO Forex, Inc., Company	$1,001 - $15,000	Dividends	$201 - $1,000	
Berkshire Hathaway HLDG., Inc. CL.A	$50,001 - $100,000	Dividends	$1 - $200	
Cisco Systems, Inc.	$1,001 - $15,000	Dividends	NONE	
Merrill Lynch & Co., Inc.	$15,001 - $50,000	Dividends	$201 - $1,000	
Riverside Group, Inc.	$1 - $1,000	Dividends	NONE	
Schlomberger LTD. Com.	$1,001 - $15,000	Dividends	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Alexander M. Crenhaw

Tenet Healthcare Corporation	$1,001 - $15,000	Dividends	NONE
Wells Fargo & Co.	$50,000- $100,000	Dividends	$201 - $1,000
Resolution Trust FDG Corporation	$100,001 - $250,000	Interest	NONE
Money Market Fund	$100,001 - $250,000	Interest	$5,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Alexander M. Crenhaw

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Templeton World Fund IRA	S	9-15-03	$15,001 - $50,000
	Mutual Shares IRA	S	9-15-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Alexander M. Crenhaw

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Aspen Institute	January 18-22	Wash., DC to Hawaii-Wash., DC	Y	Y	Y	N/A
Aspen Institute	June 27-July 3	Wash., DC to Helsinki, Finland--Wash., DC	Y	Y	Y	N/A
Nuclear Energy Institute	Aug.4-8	Rome, Italy-London, England	Y	Y	Y	N/A
Ripon Education Fund	Aug. 8-14	London, England to Jacksonville, FL	Y	Y	Y	2 Days

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 12 PM 5:37 MC
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Joseph Crowley
(Full Name)

48-24 65th Street Woodside, NY 11377
(Mailing Address)

202-225-3965
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives — State: NY District: 07 ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐	No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joseph Crowley	5/12/04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joseph Crowley

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	Reliastar Life Insurance Company-Qualified Annuity	$15,001 - $50,000	Other: Retirement Account	NONE	
SP	403B, Equitable-Pension/ Broken down into four accounts: Alliance Capital Stock, Alliance Growth and Income, Alliance International Fund, Alliance Fixed Interest	$15,001 - $50,000	Other: Retirement Account	NONE	E
	4 Farley Drive Albany, NY	$15,001 - $50,000	RENT	$2,501 - $5,000	
JT	Wright-Patman Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joseph Crowley

DC	New York's College Savings Program held by Rep. Joseph Crowley for Kenzie Crowley	$1,001 - $15,000	Other: N/A)	NONE	
DC	New York's College Savings Program held by Mrs. Kasey Crowley for Joseph Cullen Crowley	$1,001 - $15,000	Other: N/A/	NONE	
	Prudential Insurance Company	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Maspeth Federal	$15,001 - $50,000	DIVIDENDS/INTEREST	$1,001 - $2,500	
SP	ROLL OVER IRA, Northwestern Mutual Investment Servies, LLC	$15,001 - $50,000	DIVIDENDS/INTERERS	NONE	P

SCHEDULE IV - TRANSACTIONS

Name Joseph Crowley

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	ROLL OVER IRA, Northwestern Mutual Investment Servies, LLC	P	6-10-2003	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Joseph Crowley

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Chase Manhattan Mortgage Corp	Mortgage on 4 Farley Drive, Albany, NY	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Joseph Crowley

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Qatar Portion (Islamic Free Market Institute) India portion (Confederation of Indian Industry)	April 12-April 18	New York-Doha, Qatar-Bombay, India-New Delhi, India-New York	Y	Y	N	NA
Israel portion (American Israel Education Foundation), Armenia Portion (Armenian National Committee of America)	August 3, 2003-August 7, 2003	New York-Tel Aviv, Israel-Yerevan, Armenia-New York	Y	Y	N	NA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(6) LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 5:20
MC
(Office Use Only)

Barbara Cubin
(Full Name)

2241 Belmont Road
Casper WY, 82604
(Mailing Address)

225-2311
Daytime Telephone:

Filer Status	☒ Member of the U.S. House of Representatives	State: WY District: AL	☐ Officer or Employee — Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Barbara Cubin	5-17-04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Fred W. Cubin, MD	Pension	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Cubin

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B											Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X							P
	Examples: Simon & Schuster		Indefinite																	Royalties									X		
	Examples: 1st Bank of Paducah, KY accounts						X									X									X						
	S.B. Money Fund			X												X						X									
	Glaxo			X										X								X									
	Inv. Co. of America			X										X								X									
	Legacy Annuity				X									X			X														
	Identix		X														X				X										
	Pfizer			X										X								X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Cubin

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Merck		X					X					X					
	Medco (split from Merck)							X				X						
	Universal Display		X					X				X						
	Casper Mtn Land			X								X						
	Garfield Peak Land				X							X						
	TSP				X			X				X						
	CFCU		X						X				X					
	Wells Fargo Bank (NW)			X					X					X				
	SB Total Return Fund	X						X					X					
	Cascade Int.	X						X				X						
	Monsanto	X						X				X						
	State Street Mutual Fund			X				X						X				

This page may be copied if more space is required.

Name Cubin | Page 5 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
			[redacted]	C $15,001–$50,000	[redacted]	E $100,001–$250,000	[redacted]	G $500,001–$1,000,000	[redacted]	I $5,000,001–$25,000,000	[redacted]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
Mr. Diemer True, Casper WY	Round Trip flight on his private Plane between Casper & Jackson	$900

Use additional sheets if more space is required.

990

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	National Rifle Association

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-810 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 17 PM 2:59

(Office Use Only)

MC

JOHN ABNEY CULBERSON
(Full Name)

10000 MEMORIAL DRIVE SUITE 620
(Mailing Address)

HOUSTON TEXAS 77024

Daytime Telephone: (713) 682-8828

Filer Status	☑ Member of the U.S. House of Representatives — State: TEXAS District: 7	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☑	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Abney Culberson	May 17 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name John Cullerton | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the Instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties										X		S
	1st Bank of Paducah, KY accounts						X									X									X							E
																																P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Culberson

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset										BLOCK C Type of Income					BLOCK D Amount of Income										BLOCK E Transaction
		A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000		DIVIDENDS	INTEREST	EXCEPTED TRUST		Other Type of Income (Specify)	I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000		P, S, E
	Ø																				

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SCHEDULE IV — TRANSACTIONS

Name John Culberson

Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	PANHANDLE PLAINS HIGHER ED AUTHORITY	STUDENT LOAN					
	1403 23RD ST. CANYON TX 79015						
	DISCOVER CARD	REVOLVING CHARGE ACCOUNT					
	WELLS FARGO BANK	PERSONAL LINE OF CREDIT	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name John Culberson

Page 8 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days

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Name John Cullinan | Page 9 of 9

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

MAY 17 2004

LEGISLATIVE RESOURCE CENTER
2004 MAY 27 PM 5:17
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

MC

Elijah E. Cummings
(Full Name)

2014 Madison Avenue Baltimore, MD 21217
(Mailing Address)

(410) 685-9199
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative	State: MD District: 07	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Elijah E. Cummings	5-17-2004

1001

SCHEDULE I - EARNED INCOME

Name Elijah E. Cummings

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Baltimore County, MD Schools	Spouse Salary	$65,000

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Elijah E. Cummings

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Grasonville, Md, Community Center	Speech	Jan. 11, 2003	$200
Church of Holy Trinity	Speech	Jan. 19, 2003	$200
Liberty Road Corridor Ecumenical Clergy	Speech	Jan. 20, 2003	$150
Maryland National Capitol Park and Planning Commission	Speech	Feb. 2, 2003	$500
Howard University	Speech	Feb. 24, 2003	$1,000
Hemingway Temple African Methodist Episcopal Church	Speech	Mar. 9, 2003	$300
National Medical Association	Speech	Mar. 15, 2003	$2,000
The Empowerment Temple, Inc.	Speech	June 15, 2003	$1,500
Mt. Olivert Baptist Church	Speech	Sept. 20, 2003	$2,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Elijah E. Cummings

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	2014 Madison Ave., Baltimore, MD	$100,001 - $250,000	RENT	$2,501 - $5,000	
JT	5809 Leithwalk, Baltimore, MD	$50,001 - $100,000	N/A	NONE	
	Elijah E. Cummings, P.A.	None	No income per House Rules. Continued existence for resolving claims only	NONE	
	2225 St. Paul St., Baltimore, MD	None		NONE	S

SCHEDULE IV - TRANSACTIONS

Name Elijah E. Cummings

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	2225 St. Paul St., Balt., MD	S	Ongoing	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Elijah E. Cummings

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Ideal Savings & Loan, Balt., MD	Mortgage on 2225 St. Paul St., Balt., MD	$15,001 - $50,000
	First National Mortgage Company, Palatine, Illinois	Mortgage on 2014 Madison Ave., Baltimore, MD	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Elijah E. Cummings

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Community Faith Church, Houston, TX	Mar. 29-30, 2003	BWI-Atlanta-Houston-Wash, DC	Y	Y	N	None
Crime-Drug Prevention Forum	April 24-25, 2003	BWI-Denver-Oakland-Chicago-BWI	Y	Y	N	None
National Cable and Telecommunications Association	June 8, 2003	BWI-Chicago-BWI	Y	Y	N	None
Arkansas Legislative Black Caucus	Aug. 26-27, 2003	BWI-Little Rock - Cincinnati-BWI	Y	Y	N	None
Tuskeegee University	Sept. 6, 2003	BWI-Providence-BWI	Y	Y	N	None
National Black Caucus of State Legislators	December 4, 2003	BWI-Houston-BWI	Y	Y	N	None

SCHEDULE VIII - POSITIONS

Name Elijah E. Cummings

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Baltimore Zoological Society, Balt., MD
Director	Eubie Blake Cultural Center, Balt., MD
Director	Learning to Lead, Inc., Balt., MD
Member	Morgan St. Univ. Board of Regents, Balt., MD
Member	University of MD School of Law Board of Visitors, Balt., MD
Director	National Aquarium in Baltimore

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 4:02

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

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MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Randy "Duke" Cunningham
(Full Name)

2350 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-5452
Daytime Telephone:

Filer Status	☑ Member of the U.S House of Representatives	State: CA District: 50	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and witfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Randy "Duke" Cunningham	13 may 04

1009

SCHEDULE I - EARNED INCOME

Name Randy "Duke" Cunningham

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Department of Education and Encinitas Union School District	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Randy "Duke" Cunningham

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Top Gun Enterprises - Sole Shareholder	$250,001 - $500,000	CAPITAL GAINS	$5,001 - $15,000	
	Mission Valley FCU	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Union Bank Miramar - Checking	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Union Bank Miramar Checking	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
SP	Union Bank Miramar - IRA	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Union Bank Miramar - IRA	$15,001 - $50,000	INTEREST	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Randy "Duke" Cunningham

JT	Congressional FCU - Checking	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Congressional FCU - Savings	$50,001 - $100,000	INTEREST	$201 - $1,000	
DC	Union Bank Miramar	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Randy "Duke" Cunningham

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
American Gas Association	Sept. 28 - Oct. 2	Washington, DC - Sioux Falls, SD - Washington, DC	N	N	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(6)
HAND DELIVERED
LEGISLATIVE RECORDS CENTER
2004 MAY 17 PM 5:48
MC
(Office Use Only)

Artur Genestre Davis
(Full Name)
1812 4th Avenue South Apt. 210
(Mailing Address)
Birmingham, AL 35233
(202) 225-2665
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: AL District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Artur Davis	5-17-04

Name Rep. Artur Davis	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
Energen Corporation	Speech	Dec. 5, 2003	$50.00

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Name Rep. Artur Davis | Page 1 of 1

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.					
	South-trust Bank, Montgomery, AL	Personal Loan		X			
	AL Commission on Higher Education	Student Loan	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name Rep. Artur Davis | Page 1 of 2

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Harvard Black Law Student Association	Mar. 1, 2003	Wash., D.C. — Cambridge, MA - Birmingham, AL	N	N	N	N
American Israel Public Affairs Committee	Mar. 2-3, 2003	Birmingham, AL – Raleigh, NC	Y	N	N	N
Hillel Foundation	Mar. 3-4, 2003	Raleigh, NC – Medford, MA – Wash. DC.	Y	N	N	N
Faith Politics Institute	Mar. 7-9, 2003	Wash, DC – Birmingham, AL — Washington DC	Y	Y	N	N
NASDAQ	Mar. 14, 2003	Wash. DC — New York, NY — Washington, DC	N	N	N	N
Southern Corporate Law Institute	April 26, 2003	Birmingham, AL – Point Clear, AL – Birmingham, AL	Y	N	N	N
American Israel Public Affairs Committee	May 4-5, 2003	Birmingham, AL – Cambridge, MA – Wash DC	Y	Y	N	N
Eagleton Institute	May 16-17, 2003	Wash. DC — New Jersey	Y	Y	N	N
Economic Development Partnership of Alabama	June 29-30, 2003	Birmingham, AL – Pensacola Beach, FL – Birmingham, AL	Y	N	N	N
National Urban League	July 28, 2003	Birmingham, AL – Pittsburgh, PA – Birmingham, AL	N	N	N	N
ALFA Farmers	July 31, 2003	Birmingham, AL – Mobile, AL – Birmingham, AL	Y	N	N	N
Business Council of Alabama	Aug. 17-18, 2003	Birmingham, AL – Sea Destin, FL – Birmingham, AL	Y	N	N	N
American Israel Education Foundation	Aug. 2-8, 2003	Birmingham, AL – Tel-Aviv – Birmingham, AL	Y	Y	N	N
Citizen Housing + Planning Association	Sept 22-23, 2003	Wash. DC – Boston, MA – Wash. DC	N	N	N	N

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Name Rep. Artur Davis

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Democratic Leadership Conference	Oct. 18 - 19, 2003	Birmingham, AL - Atlanta, GA - Birmingham, AL	Y	N	N	N
	Alabama Association of Regional Council	Oct. 19, 2003	Birmingham, AL - Orange Beach, AL - Birm. AL	Y	N	N	N
	Anti Defamation League	Oct. 19, 2003	Wash. DC - Newark, NJ - Wash. DC	N	N	N	N
	American Israel Public Affairs Committee	Dec 28 - 29, 2003	Birmingham, AL - Wash. DC - Birmingham, AL	N	N	N	N

This page may be copied if more space is required.

Name Rep. Artur Davis	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member of Board of Trustees	Tuskegee University
Honorary Chairman	Regional Community Economic Development Initiative of the Seventh Congressional District (i.e. Initiative 7)
Board Member	Alabama Center for Law and Civic Education

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

HAND DELIVERED

7

MC

2004 JUN 15 PM 3:37

(Office Use Only)

OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Danny K. Davis
(Full Name)

5956 W Race Chicago, IL 60644
(Mailing Address)

773-533-7520
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: IL District: 7th	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Danny K. Davis	5-14-04

1020

SCHEDULE I - EARNED INCOME

Name Danny K. Davis

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Illinois	Spouse Pension	$31,859.04
Davis for Congress	Spouse Salary	$8,000
Valic Withdrawl	Spouse Pension Savings Plan	$22,870.91

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Danny K. Davis

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Greater Illinois Chapter NABCJ	Speech	March 14, 2003	$300
Greater Bethesda MB Church	Speech	March 16, 2003	$1,000
Artistic Impressions/Barton Breighner	Speech	July 23, 2003	$1,500
Carey Tercentenary AME Church	Speech	August 10, 2003	$500
Region V Headstart	Speech	November 20, 2003	$300

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Danny K. Davis

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Austin Bank	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Bank One	$1 - $1,000	INTEREST	$1 - $200	
JT	Community Bank of Lawndale	$15,001 - $50,000	INTEREST	$1 - $200	
SP	Pegasus Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
SP	Equitable IRA	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
SP	United Credit Union	$1 - $1,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Danny K. Davis

SP	Valic Annuity	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Valic Annuity	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Knight Ins. Stock	$15,001 - $50,000	DIVIDENDS	NONE	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name: Danny K. Davis

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
National Ed Association	Feb. 8	Chicago--Wash., D.C.--Chicago	N	Y	N	N/A
Natl. Assn. Black Psy	Aug. 6-7	Chicago--New Orleans, L.A.--Chicago	N	N	N	N/A
Saving Others Resources	Sept. 2	Chicago--Hartford, C.T.--Chicago	N	Y	N	N/A
Natl. Bpt. Convention	Sept. 10-11	Chicago--Kansas, M.O.--Chicago	Y	Y	N	N/A
Int. Fed. World Peace	Nov. 2-3	Wash., D.C.--New York, N.Y.--Chicago	Y	N	N	N/A
TASC	Nov. 22-23	Wash., D.C.--Raleigh, N.C.--Chicago	N	N	N	N/A

SCHEDULE VIII - POSITIONS

Name Danny K. Davis

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Congressional Black Caucus Foundation
Board Member	Streetwise Newspaper
Board Member	East West University
Advisory Board	Interfaith House
Advisory Board	Prevention Partnership

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

Jim Davis
(Full Name)

409 Cannon HOB Washington, DC 20515
(Mailing Address)

202-225-3376
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: FL District: 11	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jim Davis	5/11/04

1027

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jim Davis

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
DC	DC (2) Certificates--Treasury Securities, State of New York	$15,001 - $50,000	N/A	$201 - $1,000	
	State of Florida Retirement System	$15,001 - $50,000	Deferred Benefit Plan	NONE	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Jim Davis

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Inter-American Dialogue	February 27-March 4	Washington, DC--Havana, Cuba--Washington, DC	Y	Y	N	N/A
New Democrat Network	July 18	Washington, DC--Los Angeles--Tampa, FL	N	Y	N	N/A
Microsoft	December 11-12	Tampa, FL--Seattle, WA--Tampa, FL	Y	Y	N	N/A

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Jim Davis
(Full Name)

409 Cannon HOB Washington, DC 20515
(Mailing Address)

202-225-3376
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: FL, District: 11	☐ Officer Or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☑ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/13/04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jim Davis

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
DC	DC (2) Certificates--Treasury Securities, State of New York	$15,001 - $50,000	N/A	$201 - $1,000	
	State of Florida Retirement System	$15,001 - $50,000	Deferred Benefit Plan	NONE	

SCHEDULE VI - GIFTS

Name Jim Davis

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
New Democrat Network, Washington, DC	air travel for trip on behalf of New Democrat Network	$1,245
New Democrat Network	food expenses for trip on behalf of New Democrat Network	$153.03
New Democrat Network	car transportation expenses to/fm Airport for trip on behalf of New Democrat Network	$175

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Jim Davis

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Inter-American Dialogue	February 27-March 4	Washington, DC--Havana, Cuba--Washington, DC	Y	Y	N	N/A
Microsoft	December 11-12	Tampa, FL--Seattle, WA--Tampa, FL	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 5
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

Jo Ann S. Davis
(Full Name)

4703 Davis Way P. O. Box 1045 White Marsh, VA 23183-1045
(Mailing Address)

202 225 4261
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: VA District: 01	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	**Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "exceptad trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?**	Yes ☐ No ☑
Exemptions--	**Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?**	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		05/15/2004

SCHEDULE I - EARNED INCOME

Name Jo Ann S. Davis

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Virginia State Retirement System	Spouse's Retirement Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann S. Davis

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Chesapeake Bank	1,000-15,000	Savings	$201 - $1,000	
JT	EdwardJones Investments Putnam Invt. Growth Opport.	$1,001 - $15,000	DIVIDENDS	NONE	
SP	ICMA Retirement	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Merrill Lynch Sep IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Sun America IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Pepco Stocks	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann S. Davis

JT	Southern Co. Stocks	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Sun America Stocks Anchor National ICAP Growth Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Sun America Stocks Gov't Quality Bond	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	102 Haverstraw Yorktown, VA	$50,001 - $100,000	RENT	$2,501 - $5,000	
JT	304-B Maple Avenue Newport News, VA	$50,001 - $100,000	RENT	$2,501 - $5,000	
JT	386 Susan Constant Newport News, VA	$15,001 - $50,000	RENT	$2,501 - $5,000	
JT	56 Bedford Road Newport News, VA	$50,001 - $100,000	RENT	$5,001 - $15,000	
JT	7 Red Cedar Way Newport News, VA	$100,001 - $250,000	RENT	$5,001 - $15,000	
	Thrift Savings Plan	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE V - LIABILITIES

Name Jo Ann S. Davis

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Chesapeake Bank	Route 17 Gloucester, VA 23061	$250,001 - $500,000
JT	Bank of America	P. O. Box 1038 Norfolk, VA 23501	$10,001 - $15,000
JT	MBNA America	P. O. Box 15955 Wilmington, DE	$15,001 - $50,000

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 5

For use by Members, officers, and employees

Jo Ann S. Davis
(Full Name)

4703 Davis Way P. O. Box 1045 White Marsh, VA 23183-1045
(Mailing Address)

202 225 4261
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: VA District: 01	☐ Officer Or Employee — Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

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IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
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Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		05/15/2004

SCHEDULE I - EARNED INCOME

Name Jo Ann S Davis

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Virginia State Retirement System	Spouse's Retirement Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann S. Davis

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Chesapeake Bank	1,000-15,000	Savings	$201 - $1,000	
JT	EdwardJones Investments Putnam Invt. Growth Opport.	$1,001 - $15,000	DIVIDENDS	NONE	
SP	ICMA Retirement	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Merrill Lynch Sep IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Sun America IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Pepco Stocks	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann S. Davis

JT	Southern Co. Stocks	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Sun America Stocks Anchor National ICAP Growth Fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Sun America Stocks Gov't Quality Bond	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	102 Haverstraw Yorktown, VA	$50,001 - $100,000	RENT	$2,501 - $5,000	
JT	304-B Maple Avenue Newport News, VA	$50,001 - $100,000	RENT	$2,501 - $5,000	
JT	386 Susan Constant Newport News, VA	$15,001 - $50,000	RENT	$2,501 - $5,000	
JT	56 Bedford Road Newport News, VA	$50,001 - $100,000	RENT	$5,001 - $15,000	
JT	7 Red Cedar Way Newport News, VA	$100,001 - $250,000	RENT	$5,001 - $15,000	
	Thrift Savings Plan	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE V - LIABILITIES

Name Jo Ann S. Davis

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Chesapeake Bank	Route 17 Gloucester, VA 23061	$250,001 - $500,000
JT	Bank of America	P. O. Box 1038 Norfolk, VA 23501	$10,001 - $15,000
JT	MBNA America	P. O. Box 15955 Wilmington, DE	$15,001 - $50,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

8

LEGISLATIVE RESOURCE CENTER

2004 MAY 13 PM 1:14

MC

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Lincoln Edward Davis
(Full Name)

1690 Delk Creek Road Pall Mall, TN 38577
(Mailing Address)

931-879-6259
Daytime Telephone:

Filer Status	☒ Member of the U.S House of Representatives — State: TN District: 04	☐ Officer or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lincoln Davis	5-12-04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Pickett County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Lincoln Edward Davis | Page 3 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction
SP, DC, JT	Examples: Mega Corp Stock					X								X																		P
	Simon & Schuster																			Royalties			X									
	1st Bank of Paducah, KY accounts						X									X									X				X			
	Farm Land (Description included in memo)								X																							
	Diversified Construction Corp. (owner)								X																							

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Microsoft	July 26-29	Nashville - Seattle - Nashville	Y	Y	Y	N
	National Assoc Home Builder	Jan 21-23	Nashville - Las Vegas - Nashville	Y	Y	N	N

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lincoln Edward Davis

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Barrett Oil Archeing INC ↓ rents from mineral rights of farmland										Oil sale				X			

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Owner	Diversified Construction Company

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

SCHEDULE V — LIABILITIES

Name Lincoln Edward Davis

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Diversified Construction company which is owned by the member has a open line of credit secured by Real Estate of a limit of $250,000 at People Bank & Trust Co. Byrdstown, TN						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

LINCOLN DAVIS
4TH DISTRICT, TENNESSEE

COMMITTEES
TRANSPORTATION AND INFRASTRUCTURE
SCIENCE
AGRICULTURE

Congress of the United States
House of Representatives
Washington, DC 20515–4204

May 12, 2004

Description of Real Estate owned by Lincoln Davis:

307 acres co-owned in Pickett County that is bordered by Dale Hollow Lake.

200 acres co-owned in Fentress County that is bordered by Dale Hollow Lake.

Income received from real estate is the result of mineral lease and sale of oil production royalties.

If you need any further explanation please feel free to contact me.

Sincerely,

Lincoln Davis

504 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-6831
FAX: (202) 225-5172

629 NORTH MAIN STREET
JAMESTOWN, TN 38556
(931) 879-2361
FAX: (931) 879-2389

1064 NORTH GATEWAY AVENUE
ROCKWOOD, TN 37854
(865) 354-3323
FAX: (865) 354-3316

1804 CARMACK BOULEVARD
SUITE A
COLUMBIA, TN 38401
(931) 490-8699
FAX: (931) 480-8875

www.house.gov/lincolndavis

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(13)

HOUSE REPRESENTATIVE RESOURCE CENTER
2004 MAY 17 AM 10: 33
(Office Use Only)

SUSAN A. DAVIS
(Full Name)

5241 CANTERBURY DRIVE SAN DIEGO, CA 92116
(Mailing Address)

(619) 281-6235
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: CA District: 53	☐ Officer Or Employee — Employing Office:	**A $200 penalty shall be assessed against anyone who files more than 30 days late.**
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	
	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Susan A. Davis	5-14-04

1052

SCHEDULE I - EARNED INCOME

Name SUSAN A. DAVIS

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
SELF EMPLOYMENT	SPOUSE SALARY	
CENTRO DE SALUD-HEW	SPOUSE SALARY	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name SUSAN A. DAVIS

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	4113-15 ARBOR VITAE SAN DIEGO, CA	$250,001 - $500,000	RENT	$5,001 - $15,000	
JT	AMERICAN ADVANTAGE FD	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	AMERICAN INTERNATIONAL GROUP	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	ARIEL APPRECIATION FUND	None		$5,001 - $15,000	S
SP	ARIEL APPRECIATION FUND	None		$5,001 - $15,000	S
JT	ARIEL FUND	$1,001 - $15,000		NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name SUSAN A. DAVIS

SP	ARIEL FUND	$15,001 - $50,000	DIVIDENDS	NONE	
	ARTISAN FUNDS	$1,001 - $15,000		NONE	S
SP	BERGER INVT PORT	$15,001 - $50,000	DIVIDENDS	$1 - $200	Other
JT	CAL-AMER INC PROP IV	$1,001 - $15,000		$5,001 - $15,000	
JT	CISCO SYSTEMS INC	$1,001 - $15,000	DIVIDENDS	NONE	
SP	CMF US GOVT PORT	$1 - $1,000		$1 - $200	P
SP	CMF MONEY MARKET PORT	$50,001 - $100,000		$50,001 - $100,000	P
JT	COSTCO WHOLESALE CORP	$15,001 - $50,000	DIVIDENDS	NONE	
JT	DOWNEY FINANCIAL	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	DREYFUS GNMA FUND	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	DREYFUS GNMA FUND	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	FREMONT INVT & LOAN CA	$15,001 - $50,000		$201 - $1,000	P
JT	GENERAL ELECTRIC	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
JT	HOME DEPOT	$1,001 - $15,000	DIVIDENDS	$1 - $200	

JT	HONEY SPRINGS	$50,001 - $100,000		$5,001 - $15,000	
SP	JANUS INVT FD	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	JANUS INVT FD	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
	JANUS INV BALANCED FUND	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	JULIUS BAER INVT FDS	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
JT	LOS GATOS CA UN SCH DIST	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	MILL CREEK BANK	$15,001 - $50,000		NONE	S
	NATIONWIDE RETIREMENT	$50,001 - $100,000		$201 - $1,000	
SP	NATIONWIDE RETIREMENT	$1,001 - $15,000		$201 - $1,000	
SP	NICM MONEY MARKET	$1 - $1,000		$1 - $200	S
SP	NICM MONEY MARKET PORT	$50,001 - $100,000		NONE	S
	PARNASSUS INCOME TRUST	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	PAYDEN CORE BOND	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
SP	PAYDEN LIMITED MATURITY	None		$50,001 - $100,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name SUSAN A. DAVIS

SP	PIMCO FDS	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	P
	PIMCO FDS	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	PROCTOR & GAMBLE CO	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	RAINBOW EXIT LLC	None		$50,001 - $100,000	S
SP	RAINBOW EXIT LLC	None		$100,001 - $1,000,000	S
JT	SACRAMENTO CA MUN UTIL DIST	None		$15,001 - $50,000	S
SP	SELECTED AMERICAN SHARES	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
JT	SMUCKER JM COMPANY	$1 - $1,000	DIVIDENDS	$1 - $200	
SP	STATE OF CA PUBLIC EMPLOYEES RETIREMENT SYSTEM	$15,001 - $50,000		$201 - $1,000	
SP	STRONG ADVISOR SMALL CAP	$1,001 - $15,000	DIVIDENDS	NONE	
SP	T. ROWE PRICE EQTY	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	T. ROWE PRICE MID CAP	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	T. ROWE PRICE MID CAP	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	TD WATERHOUSE BANK	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name SUSAN A. DAVIS

SP	TD WATERHOUSE MONEY MARKET	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	THIRD AVE VALUE FUND	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	VANGUARD INDEX 500	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	VANGUARD INDEX 500	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	VANGUARD INDEX 500	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	VANGUARD LIMITED TERM TAX EXEMPT	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	P
JT	VERIZON COMMUNICATIONS	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	WAL-MART STORES INC	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name SUSAN A. DAVIS

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	ARIEL APPRECIATION FUND	S	4-25-03	$1,001 - $15,000
SP	AREIEL APPRECIATION FUND	S	4-25-03	$1,001 - $15,000
	ARTISAN FUNDS	S	4-25-03	$1,001 - $15,000
JT	ARIEL FUND	P	9-22-03 11-25-03	$1,001 - $15,000
SP	MILL CREEK BANK	S	8-28-03	$15,001 - $50,000
SP	BERGER INVT PORT (SEE FOOTNOTE 1)	Other	4-21-03	$1,001 - $15,000
SP	NICM MONEY MARKET (SEE FOOTNOTE 2)	S	9-23-03 9-29-03	$50,001 - $100,000
SP	CMF US GOVT PORT (SEE FOOTNOTE 3)	P	9-29-03	$1,001 - $15,000
SP	NICM US GOVT PORT (SEE FOOTNOTE 3)	S	9-29-03	$1,001 - $15,000
SP	CMF MONEY MARKET PORT (SEE FOOTNOTE 2)	PS&E	9-29-03 9-30-03 12-18-03	$50,001 - $100,000
SP	PAYDEN LIMITED MATURITY	S	4-25-03	$50,001 - $100,000

SCHEDULE IV - TRANSACTIONS

Name SUSAN A. DAVIS

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	PIMCO FDS	P	4-25-03 4-28-03 10-22-03	$50,001 - $100,000
JT	SACRAMENTO CA MUN UTIL DIST (SEE FOOTNOTE 3)	Other	11-15-03	$15,001 - $50,000
SP	T. ROWE PRICE MID CAP	P	4-25-03 7-15-03 9-22-03 10-22-03 11-13-03 12-17-03	$15,001 - $50,000
JT	VANGUARD LIMITED TERM TAX EXEMPT	P	2-4-03 4-25-03 5-20-03 6-13-03 7-15-03 11-25-03	$50,001 - $100,000
	T. ROWE PRICE MID CAP	P	4-28-03 11-26-03	$1,001 - $15,000
	JULIUS BAER INVT FDS	P	4-28-03 11-26-03	$1,001 - $15,000
SP	JANUS INVT FD (SEE FOOTNOTE 1)	P	4-21-03	$1,001 - $15,000
SP	TD WATERHOUSE MONEY MARKET (SWEEP FROM CMF)	Other	12-31-03	$15,001 - $50,000
SP	FREMONT INVT & LAON CA	P	10-21-03	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name SUSAN A. DAVIS

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	JANUS INVT FD	P	5-22-03 6-13-03 7-15-03 11-13-03 12-15-03	$15,001 - $50,000
SP	RAINBOW EXIT LLC	S	4-14-03	$50,001 - $100,000
SP	RAINBOW EXIT LLC	S	4-14-03	$100,001 - $250,000

SCHEDULE V - LIABILITIES

Name SUSAN A. DAVIS

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	BANK UNITED OF TEXAS	MORTGAGE ON 4113-15 ARBOR VITAE	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name SUSAN A. DAVIS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
CA COUNCIL FOR INTERNATIONAL TRADE	JAN 10-12	SAN DIEGO, CA-MONTEREY, CA-SAN DIEGO	Y	Y	N	NA
THE FAITH & POLITICS INSTITUTE	MAR 7-9	SAN DIEGO-SELMA, AL-SAN DIEGO	Y	Y	Y	NA
THE BUSINESS ROUNDTABLE	MAY 1-2	WASH., DC-NYC-WASH., DC	Y	Y	N	NA
AMERICAN ISRAEL FOUNDATION	AUG 2-10	NYC-TELAVIV-NYC	Y	Y	Y	NA
NEW DEMOCRAT NETWORK	NOV 14-15	SAN DIEGO, CA- SAN FRANCISCO-SAN DIEGO, CA	Y	Y	N	NA
ANNENBERG FOUNDATION TRUST AT SUNNYLANDS (CA DELEGATION BIPARTISAN PLANNING SESSION)	DEC 5-7	NA	Y	Y	Y	NA

FOOTNOTES

Name SUSAN A. DAVIS

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule IV	BERGER INVT PORT CHANGED TO JANUS FD	JANUS INVT FD (SEE FOOTNOTE 1)
2	Schedule IV	NICM MONEY MARKET EXCHANGED FOR cmf MONEY MARKET PORT	CMF MONEY MARKET PORT (SEE FOOTNOTE 2)
3	Schedule IV	NICM US GOVT PORT EXCHANGED FOR CMF US GOVT PORT	CMF US GOVT PORT (SEE FOOTNOTE 3)
4	Schedule IV	REDEEMED	SACRAMENTO CA MUN UTIL DIST (SEE FOOTNOTE 3)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 14 PM 3:53

(Office Use Only)

MC

Thomas M. Davis, III
(Full Name)

6314 Crosswoods Circle, Falls Church, Virginia 22044
(Mailing Address)

Daytime Telephone: 202-225-1492

Filer Status	☒ Member of the U.S. House of Representatives — State: Virginia District: Eleventh	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas M. Davis III	May 14, 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Davis, Hall & Hatner	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A	Block B	Block C	Block D	Block E
	A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other: Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT *Examples:* SP Mega Corp. Stock	Indefinite; F X			P
DC Simon & Schuster				
JT 1st Bank of Paducah, KY accounts				
Virginia ~~State~~ Public Authority Bonds	D X	DIVIDENDS X	IV X	
Oceana Prop. Partnership VA Beach, VA	E X	RENT X	V X	
Fairfax County Public Improvement Funds	D X	INTEREST X	VI X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas M. Davis III

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Charles Schwab Tax Exempt Money Fund								X					X				
	Black & Decker		X															
	Savings Account - Bank of America								X				X					
	PRC, Inc - 401K Plan				X				X					X				
	401K Plan - Deferred Comp. Fairfax County								X					X				
	Charles Schwab Investments:																	
	Dodge & Cox Stock Fund													X				
	FMI Common Stock Fund													X				
	Henlopen Fund													X				
	Jensen Portfolio CL J													X				
	Oakmark Global Fund CL I													X				
	PBHG Mid-Cap Fund													X				
	Royce Special Equity Fund													X				

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SCHEDULE IV — TRANSACTIONS

Name Thomas H. Davis III

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Black & Decker		X		1/10/03	X									

This page may be copied if more space is required.

Name Thomas M. Davis III | Page 6 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 23 Main St., Dover, Del.		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
New York Stock Exchange	Commemorative Statue	$354

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(11)

LEGISLATIVE RESOURCE CENTER
2004 MAY 18 AM 9:43
(Office Use Only)

MC

Peter DeFazio
(Full Name)

2134 RHOB
(Mailing Address)

225-6416
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State: OR District: 04	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Peter A DeFazio	16 May 04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. GOVT	SELF SALARY	N/A
	CITY OF EUGENE OR	SP SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name	DeFazio	Page 3 of 11

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name DeFazio

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None; B $1 - $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock	Indefinite	X	X	P
	Simon & Schuster			Royalties	
	1st Bank of Paducah, KY accounts	X	X	X	
Self	FERS Def Comp	X			
Self	IRA				
	T Row Price EQY	X		X	
	Domini Soc Eq	X		X	
	PCLN Stock	X		X	
Self	Oakmark Select	X	X	X	No Purchase

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name DeFazio

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SELF	OAKMARK Money MKT								X			X						
SELF	Dominion Resources		X					X				X						P
SELF	WRIGHT PATMAN FCU		X						X									
SELF	ECLCO CU		X						X			X						
SELF	BANK OF NEW ZEALAND		X						X				X					
JT	½ Share Rental Property			X										X				
	31 Hamploman Arang NZ																	
JT	Rental 335 Awalua, Paulina NZ				X				X					X				P
SP	IRA OAKMARK EQ/I			X														P
SP	Pacific Cascade FCU		X						X			X						
SP	Deferred Comp (ING)																	P
	Fidelity Contra Fund			X				X					X					P
	ING Fixed				X				X			X						P
	ING VP Index + Small Cap		X					X					X					P
	Pax World Bal		X					X				X						P
	ING VP Mid Cap		X					X				X						P
	Scudder EQ 500		X					X				X						P
	Euro Pacific Growth		X					X				X						P
	Baron Growth		X					X				X						P
	Van Kampen Comstock		X									X						P
	ING Bal Port		X					X										P
	Templeton For Fund		X					X				X						P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: DeFazio

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	VALIC Def Comp			X				X	X		~~Sp/Jos~~		X					S (Marital)
SP	Nationwide Def Com	X						X	X		~~Sp/Jos~~							S
	↑(Plan Liquidated By Employer)																	
SP	Sentinel Bond	X						X					X					S
SP	Sentinel Balanced																	
SP	Sentinel Govt Sec												X					
SP	Bank of New Zealand		X						X				X					
SP	Pacific Cascade FCU		X															

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SCHEDULE IV — TRANSACTIONS

Name DeFazio | Page 7 of 11

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
SELF	OAKMARK SELECT	X			AUTO MONTHLY	X ← (TOTAL FOR YEAR)									
SELF	DOM RESOURCES	X			1/7/03										
"	" "	X			4/6/03										
"	" "	X			5/4/03										
"	" "	X			7/9/03	X (TOTAL FOR YR)									
"	" "	X			9/4/03										
"	" "	X			9/16/03										
"	" "	X			11/1/03										
"	" "	X			12/3/03										
SP	IRA GABELLI GLOBAL TCOM		X		2/4/03	X									
"	" BERGER BALANCED		X		2/4/03	X									
"	" INTRECCO DYNAMICS		X		2/9/03	X									
"	" OAKMARK EQ Y	X			2/10/03		X								

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SCHEDULE IV — TRANSACTIONS

Name: DeFazio

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	Example: Mega Corporation Common Stock				10-12-03		X								
SP	NATIONWIDE DEF COMP - LIQUIDATED BY EMPLOYER		X		3/19/03			X							
SP	ING DEF COMP - INITIATED BY EMPLOYER	X			3/20/03			X							
	FIDELITY CONTRA	X			all the DEF		X								
	ING FIXED	X						X							
	ING VP INDEX + SMALL CAP	X				X									
	PAX WORLD BALANCED	X				X									
	ING VP MID CAP	X				X									
	SCUDDER EQ 500	X				X									
	EURO PACIFIC GROWTH	X				X									
	BARON GROWTH	X				X									
	VAN KAMPEN COMSTOCK	X				X									
	ING BAL PORT	X				X									
	TEMPLETON FOR FUND	X				X									
SP	VALIC DEF COMP (PARTIAL SALE TRANSFER TO ING)		X		3/20/03		X								
JT	335 Amakina Amakina N.Z.	X			4/24				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
				C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x					
JT	Countrywide Funding	53880 Pine Grove Lapine OR			X						
JT	Bank of New Zealand										
	1/4 interest	36 Hemplemann Avenue NZ									
JT	Bank of New Zealand	335 Apparing, Auckland NZ			X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
	None	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	US-New Zealand Council	1/10 - 1/23	DC → Auckland → Portland	Y	Y	N	4 Days
	Alaska Coalition, Alaska Wilderness League, Audubon Society, Sierra Club	6/28 - 7/2	Eugene OR → Alaska → Eugene	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	None

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 91-610 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

HAND DELIVERED

HC 28

LEGISLATIVE RESOURCE CENTER

2004 MAY 14 PM 1

(Office Use Only)

Diana Louise DeGette
(Full Name)

1530 Longworth House Office Building Washington, DC 20515
(Mailing Address)

202-225-4431
Daytime Telephone

Filer Status ☑ Member of the U.S. House of Representatives State: CO District: 1 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Diana L. DeGette	5-13-04

1082

SCHEDULE I - EARNED INCOME

Name Diana Louise DeGette

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
McKenna Long & Aldridge LLP	Spouse's Share of Partnership Income	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Diana Louise DeGette

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Wells Fargo Bank West, NA	$1,001- $15,000	Interest	$1-$200	N/A
JT	Cisco Common Stock	$1,001 - $15,000	N/A	NONE	N/A
IRA	Fidelity Aggressive Growth	$1,001 - $15,000	N/A	NONE	N/A
IRA	Fidelity Magellan Fund	$1,001 - $15,000	Capital Gains	$1 - $200	P
IRA	Fidelity Growth Company	$1,001 - $15,000	N/A	NONE	N/A
	Public Employees Retirement Association	$1,001 - $15,000	Interest	$201 - $1,000	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Diana Louise DeGette

SP	Boeing Company Common Stock	$1,001 - $15,000	Dividends	$1 - $200	N/A
SP	Walt Disney Company Common Stock	$15,001 - $50,000	Dividends	$201 - $1,000	N/A
SP	Procter & Gamble Company Common Stock	$1,001 - $15,000	Dividends	$1 - $200	N/A
SP	Fidelity Growth Company	$15,001 - $50,000	N/A	NONE	N/A
SP	Fidelity Growth & Income	$1,001 - $15,000	Capital Gains	$1 - $200	P
SP	Fidelity Magellan Fund	$1,001 - $15,000	Capital Gains	$1 - $200	P
SP	Fidelity Select Electronics	$1,001 - $15,000	N/A	NONE	N/A
SP	Fidelity Select Technology	$1,001 - $15,000	N/A	NONE	N/A
SP	Fidelity Aggressive Growth	$1,001 - $15,000	N/A	NONE	N/A
SP	Cisco Common Stock	$1,001 - $15,000	N/A	NONE	N/A
SP	McKenna Long & Aldridge LLP Profit Sharing Plan	$50,001 - $100,000	N/A	N/A	P

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Diana Louise DeGette

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Aspen Institute	May 26-June 1	Denver, Colorado -- Rome, Italy -- Denver, Colorado	Y	Y	Y	N/A
International Management and Development Institute	February 18 - February 21	Denver, Colorado -- Cologne, Germany -- Denver, Colorado	Y	Y	N	1 Day
JFK School of Government	January 16-January 19	Denver, Colorado-- Tampa, Florida -- Denver, Colorado	Y	Y	Y	N/A

HARVARD
UNIVERSITY
JOHN F. KENNEDY
SCHOOL OF GOVERNMENT

September 25, 2002

The Honorable Diana DeGette
1530 Longworth House Office Building
Washington, DC 20515

Dear Congresswoman DeGette:

We are delighted to invite you back for the fifth John F. Kennedy School of Government/Commonwealth Fund Bipartisan Congressional Health Policy Conference. Once again, a select group of members of the House and Senate are being invited to meet in an informal, off the record setting with a group of academics and practitioners from a wide variety of backgrounds who bring a multitude of opinions on some truly timely issues. Like last year, our "speakers" will make brief remarks at the outset of each session leaving ample time for discussion.

The retreat will again take place at Turnberry Isle Resort and Club in Aventura, Florida, www.turnberryisle.com. The dates are set for January 16-18, 2003, however like last year you and your spouse are invited to stay at the hotel through Sunday, January 19th. The program will begin with a dinner on Thursday evening. Sessions will run through lunch on Friday and Saturday, leaving your afternoons free for reflection on the morning's events. There is also a dinner scheduled for Friday evening. Our speakers are invited to stay throughout the program so you'll have a chance to meet with them outside of the sessions as well.

A draft schedule is enclosed for your review. Our goal is to again use this opportunity to reflect on a variety of topics, from the challenges and opportunities of research on the human genome, to questions related to the uninsured and patient safety. We will begin on Thursday evening with a discussion on improving health care quality.

Meetings are completely off the record and attendance is by invitation only. No press, staff or outside observers are permitted.

79 John F. Kennedy Street Cambridge, Massachusetts 02138

The meeting is being funded by a grant from the Commonwealth Fund, a private foundation that supports independent research on health and social issues and makes grants to improve health care practice and policy. Harvard University will cover travel and accommodation costs for you and your spouse for the duration of the program. No government, private, corporate, or special interest money is involved. Expenses for you and your spouse, including coach-class airfare, lodging, and meals, will be paid by Harvard University. If you can commit early, we would like to make airline reservations as soon as possible.

We are very hopeful that you will be able to join us again in 2003 and encourage you or your staff to call our conference coordinator, Christian Flynn (617) 496-7124, should you have any questions. We look forward to hearing from you.

Sincerely,

Sheila

Sheila Burke
Adjunct Lecturer in Public Policy

Joe Newhouse

Joseph Newhouse
John D. MacArthur Professor of Health Policy and Management

Julie

Julie Wilson
Director, Malcolm Wiener Center for Social Policy

John F. Kennedy School of Government/ The Commonwealth Fund
Bipartisan Congressional Health Policy Conference

Turnberry Isle Resort and Club
19999 West Country Club Drive, Aventura, Florida
January 16-18, 2003

Thursday, January 16
Turnberry Isle Resort and Club

6:00-7:00 *Poolside* — Opening Reception

7:00 *Garden Room I* — Dinner

WELCOME AND INTRODUCTIONS
Sheila P. Burke, R.N., M.P.A., FAAN, Adjunct Lecturer, John F. Kennedy School of Government
Karen Davis, Ph.D., President, The Commonwealth Fund

AMERICA'S HEALTH CARE PRIORITIES
Bob Blendon, Sc.D., Professor of Health Policy and Political Analysis, John F. Kennedy School of Government
Robert Reischauer, Ph.D., President, Urban Institute
Julie Wilson, Ph.D. (moderator), Director, Malcolm Wiener Center for Social Policy, John F. Kennedy School of Government

Friday, January 17
Turnberry Isle Resort and Club

8:00-9:00 *Garden Foyer* — Continental Breakfast

9:00-10:30 *Garden Room II* — REFORMING MEDICARE: ISSUES AND OPTIONS
Marilyn Moon, Ph.D., Senior Fellow, Urban Institute
Samuel O. Thier, M.D., President and CEO, Partners HealthCare System, Inc.; Professor of Medicine and Health Care Policy, Harvard Medical School
Gail Wilensky, Ph.D., Senior Fellow, Project HOPE
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

10:30-10:45 *Garden Foyer* — Break

10:45-12:00 *Garden Room II* — MEDICAID: FOCUSING ON STATE INNOVATION
Mary Kennedy, Medicaid Director, Assistant Commissioner for Health Care, Department of Human Services, Minnesota
Diane Rowland, Sc.D., Executive Director, Kaiser Commission on Medicaid and the Uninsured
James Tallon, President, United Hospital Fund; Chairman, Kaiser Commission on Medicaid and the Uninsured
Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government

12:15-1:30 Lunch
Garden Room I
BALANCING SAFETY, EFFECTIVENESS AND PUBLIC DESIRE: THE FDA AND CANCER
Jane E. Henney, M.D., Senior Scholar, Association of Academic Health Centers; former Commissioner of Food and Drugs, Food and Drug Administration
Joseph Simone, M.D., Chair, National Cancer Policy Board, Institute of Medicine; President, Simone Consulting
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

1:30-6:30 Private Time

6:30-7:15 Reception
Poolside

7:15 Dinner
Veranda East & West
COMPARING HEALTH CARE SYSTEMS: SUCCESSES, FAILURES, TRENDS
Sir Liam Donaldson, M.Sc., M.D., Chief Medical Officer, Department of Health, Department of Health, United Kingdom
The Honourable Anne McLellan, MP, Minister of Health, Canada *invited*
Uwe Reinhardt, Ph.D., James Madison Professor of Political Economy and Professor of Economics and Public Affairs, Princeton University
Julie Wilson, Ph.D. (moderator), Director, Malcolm Wiener Center for Social Policy, John F. Kennedy School of Government

Saturday, January 18
Turnberry Isle Resort and Club

8:00-9:00 Continental Breakfast
Garden Foyer

9:00-10:20
Garden Room II
STRATEGIES FOR EASING THE NURSE WORKFORCE SHORTAGE
Linda Aiken, Ph.D., FAAN, FRCN, R.N., Claire M. Fagin Leadership Professor in Nursing, Professor of Sociology and Director of the Center for Health Outcomes and Policy Research, University of Pennsylvania School of Nursing
Peter I. Buerhaus, Ph.D., FAAN, R.N., Valere Potter Professor of Nursing, Senior Associate Dean for Research, Vanderbilt University School of Nursing
Pamela Cipriano, Chief Clinical Officer, University of Virginia Health Systems
Gary Mecklenburg, President and CEO, Northwestern Memorial HealthCare; CEO, Northwestern Memorial Hospital
Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government

10:20-10:40 Break
Garden Foyer

10:40-12:00
Garden Room II
COVERING THE UNINSURED: PROSPECTS AND PROBLEMS
Stuart Butler, Ph.D., Vice President, Domestic and Economic Policy Studies, The Heritage Foundation
Judy Feder, Ph.D., Professor and Dean of Policy Studies, Georgetown University
John W. Rowe, M.D., Chairman, President and CEO, Aetna Inc.
Cathy Schoen, Ph.D., Vice President, The Commonwealth Fund; Executive Director, Fund Task Force on the Future of Health Insurance
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

12:15-1:30 Lunch

Garden Room I

SMALLPOX VACCINATIONS: THE RISKS AND THE BENEFITS

William Bicknell, Professor of International Health, Boston University School of Public Health

Donald A. Henderson, M.D., Founding Director, Center for Civilian Biodefense Studies, Johns Hopkins University, Bloomberg School of Public Health

Marci Layton, M.D., Assistant Commissioner for Communicable Disease, New York City Department of Health

Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government

U.S.-German Roundtable for the 21st Century

February 19-21, 2003

Cologne & Bonn, Germany

Confirmed Delegation Members

1. Rep. Howard Coble (R-NC)
2. Rep. Diana DeGette (D-CO)
3. Rep. Phil English (R-PA)
4. Rep. Gene Green (D-TX)
5. Rep. Maurice Hinchey (D-NY)
6. Rep. Eddie Bernice Johnson (D-TX)
7. Rep. Tom Lantos (D-CA)
8. Rep. Cliff Stearns (R-FL)
9. Rep. Robert Wexler (D-FL)

US-German Round Table

BDI IMDI

DRAFT

US-German Round Table for the 21st Century

February 19 to 21, 2003 – Cologne / Bonn

Conference Agenda

(as of 10 February 2003)

Chairman:
- **Michael Rogowski**, President, Federation of German Industries (BDI)

Host:
- **Klaus Zumwinkel**, Chairman of the Board of Management, Deutsche Post AG

Co-Hosts:
- **Klaus-Peter Müller**, Chairman of the Board of Managing Directors, Commerzbank AG
- **Jürgen Fitschen**, Member of the Group Executive Committee, Deutsche Bank AG

US Congressional Delegation:

Moderator:
- **Don Bonker**, President, International Management and Development Institute (IMDI)

Accommodation:

Hyatt Regency Cologne
Kennedy-Ufer 2a
D – 50679 Köln
Phone: + 49 – 221 – 828 1234
Fax: + 49 – 221 – 828 1370
www.cologne.hyatt.com

We would like to thank Bankhaus Sal. Oppenheim jr. & Cie., Boehringer Ingelheim GmbH, the City of Cologne, DaimlerChrysler AG, Dr. Arend Oetker Holding, HOCHTIEF AG, Infineon Technologies AG, Konvekta AG, Lufthansa AG, ThyssenKrupp AG, TUI AG, Volkswagen AG, and WestLB for their contribution to the organization of the US-German Round Table 2003.

Wednesday, February 26, 2003

Morning	Arrival of Congressional Delegation	
3:30 p.m.	Departure from Hyatt Hotel	
	Tour of the Cologne Cathedral	*(with spouses)*
7:00 p.m.	Informal Dinner in Cologne	*(with spouses)*

Thursday, February 27, 2003

9:30 – 12:00 a.m.	Departure from Hyatt Hotel	
	City tour: Romanic churches in Cologne (with organ concert)	*(with spouses)*
12:30 – 2:00 p.m. Hyatt Regency Cologne	**Opening Session** **Luncheon** Welcoming Remarks: - **Michael Rogowski**, President, BDI Introduction of Congressional Delegation: - **Don Bonker**, President, IMDI	
2:00 – 3:30 p.m. Hyatt Regency Cologne	**Panel I** **"How do the current political conditions impact our bilateral relationship?"**	
3:30 – 4:00 p.m.	Apple Break	

[redacted]

4:00 – 5:30 p.m. Hyatt Regency Cologne	**Panel II** **"In search of long-term effectiveness in international economic and trade policies: unilateralism or common approaches"**
6:30 p.m.	Departure from Hyatt Hotel
7:00 p.m.	**Reception in the Cologne Historic City Hall** *(with spouses)* Invitation of the City of Cologne Welcoming Remarks: - **Fritz Schramma**, Lord Mayor of the City of Cologne **Gala Dinner in the Roman-Germanic Museum** *(with spouses)* Invitation of Bankhaus Sal. Oppenheim jr. & Cie. Welcoming Remarks and guided tour of the museum: - **Hansgerd Hellenkemper**, Director of the Roman-Germanic Museum Opening: - **Michael Rogowski**, President, BDI Welcoming Remarks: - **H.E. Daniel R. Coats**, Ambassador of the United States of America to Germany (to be confirmed) Dinner Speech: - **Wolfgang Clement**, Federal Minister of Economics and Labour

[illegible] – Bonn

8:30 a.m.	Departure from Hyatt Hotel
9:15 – 9:30 a.m. Post Tower, Bonn	**Introduction** - **Michael Rogowski**, President, BDI Welcoming Remarks: - **Klaus Zumwinkel**, Chairman of the Board of Management, Deutsche Post AG
9:30 – 11:00 a.m. Post Tower, Bonn	**Panel III** **"Anti-globalization movements and international terrorism: new risks and challenges for global business?"**
11:00 – 11:30 a.m.	Coffee Break
Parallel Post Tower, Bonn	**Press Conference** - **Klaus-Peter Müller**, Chairman of the Board of Managing Directors, Commerzbank AG - **Michael Rogowski**, President, Federation of German Industries (BDI) - **Klaus Zumwinkel**, Chairman of the Board of Management, Deutsche Post AG - **Co-Chairmen of Congressional Delegation** Moderator: **Arend Oetker**, Vice President, BDI; Chairman, US-Committee of the BDI; Managing Partner, Dr. Arend Oetker Holding GmbH & Co.; Chairman of the Board of Directors, Atlantik-Brücke e.V.
11:30 a.m. – 1:00 p.m. Post Tower, Bonn	**Panel IV** **"Corporate Governance – lessons from the recent developments"**

Friday, February 21, 2003 Bonn

1:00 – 2:30 p.m. Post Tower, Bonn	**Luncheon**
	Welcoming Remarks: - **Bärbel Dieckmann**, Lord Mayoress of the City of Bonn
	Luncheon Speech. - **Angela Merkel**, Chairwoman of the Christian Democratic Party *(to be confirmed)*
2:30 – 2:45 p.m. Post Tower, Bonn	**Closing Remarks**
	Michael Rogowski, President, BDI

(Selected media representatives will be present during the conference)

Panel I:
"How do the current political conditions impact our bilateral relationship?"

The recent divisions over Iraq at the UN and NATO have severely strained transatlantic relations and challenged leaders, particularly in Washington and Berlin, to deal with this politically difficult issue while maintaining a commitment and working to sustain an important alliance. How can diverse public sentiment and political leadership in both countries converge in a manner that better insures cooperation in dealing with rouge nations and security threats in the world? What does this mean for the global business climate, and the economic/business relationship between the U.S. and Germany.

Panel II:
"In search of long-term effectiveness in international economic and trade policies: Unilateralism or common approaches?"

How can governments best deal with the pressures and short-term benefits of economic measures that are unilateral and often self-serving rather than adopting policies that, in the long term, represent greater stability and generally enhanced economic benefits for all nations? What is the preferred approach to insuring a more equitable and just trading system – a series of bilateral trade agreements or a more viable World Trade Organization?

Panel III:
"Anti-globalization movements and international terrorism: New risks and challenges for global business?"

While these two phenomena affect the way business is conducted within countries and internationally, they are vastly different in their objectives. How can business be a positive force in dealing with concerns at the root of the anti-globalization movement? On terrorism, since much of the threat targets businesses, is it possible to achieve the security protections both business and government seek without new regulations that put costly and onerous demands on businesses?

Panel IV:
"Corporate Governance – lessons from the recent developments"

What has the recent experience of corporate excesses and scandals in America taught us about the business culture in general? Is enactment of the Sarbanes-Oxley law a sufficient remedy to correct abuses of the past. Are U. S. government regulatory agencies sufficiently equipped (mandates, staffing, commitment to enforcement) to insure proper corporate behavior in the future? How can business leaders in both countries set a higher standard and earn the trust of consumers and general public? Given that European companies have a better record of corporate responsibility, how can we learn from their experience?

US-German Round Table for the 21st Century

February 19 to 21, 2003 – Cologne / Bonn

Participants

Chairman:

Michael Rogowski	President Federation of German Industries (BDI)

Host:

Klaus Zumwinkel	Chairman of the Board of Management Deutsche Post AG

Co-Hosts:

Klaus-Peter Müller	Chairman of the Board of Managing Directors Commerzbank AG
Jürgen Fitschen	Member of the Group Executive Committee Deutsche Bank AG

Congressional Moderator:

Don Bonker	President International Management and Development Institute (IMDI)

Congressional Chairman:

Tom Lantos	Democrat – California US House of Representatives

Congressional Delegation:

Coble	Howard	Republican – North Carolina US House of Representatives
DeGette	Diana	Democrat – Colorado US House of Representatives
English	Phil	Republican – Philadelphia US House of Representatives
Green	Gene	Democrat – Texas US House of Representatives
Hinchey	Maurice	Democrat – New York US House of Representatives
Johnson	Eddie Bernice	Democrat – Texas US House of Representatives
Stearns	Cliff	Republican – Florida US House of Representatives
Wexler	Robert	Democrat – Florida US House of Representatives

US Participants:

Coats	Daniel R.	Ambassador of the United States of America to Germany
Engle	Thomas S.	Economic Counselor Embassy of the United States of America to Germany
Fogorasi	John	Minister-Counselor for Commercial Affairs Embassy of the United States of America to Germany
Gobush	Matthew	Lantos Press Secretary
Harris	Daniel	Consul General US Consulate General Cologne
Howard	Troy	Communications Director Office of Representative Johnson
King	Robert	Chief of Staff Office of Representative Lantos
Lantos	Annette	Executive Assistant to the Congressman Office of Representative Lantos
Mazza	Nancy	District Representative Office of Representative Coble
Nelson	David D.	Minister-Counselor for Economic Affairs Embassy of the United States of America to Germany
Schleidt	Sabine	Executive Vice President International Management and Development Institute

German Participants:

Oetker	Arend	Vice Chairman and Chairman US-Committee Federation of German Industries Managing Partner Dr. Arend Oetker Holding GmbH & Co. KG
Ammon	Peter	Director General for Economic Affairs and Sustainable Development Federal Foreign Office
Banchi	Alessandro	Member of the Board of Managing Directors Boehringer Ingelheim Pharma KG
Bergmann	Robert	President Representative of German Industry & Trade
Brauner	Karl-Ernst	Director General External Economic Policy Federal Ministry of Economics and Labour
Focke	Heinrich	Chairman of the Executive Board Gerling Versicherungs-Beteiligungs AG
Goose	Dieter	Member of the Management Board DekaBank
Hefekäuser	Hans-Willi	Leiter des Zentralbereichs Ordnungs- und Wettbewerbspolitik Deutsche Telekom AG
Ischinger	Wolfgang	Ambassador of the Federal Republic of Germany to the United States

Jungen	Peter	Chairman and Owner Peter Jungen Holding GmbH
Kammer	Jürgen F.	Chairman of the Managing Board SÜD-CHEMIE AG
Kleinert	Matthias	Senior Vice President DaimlerChrysler AG
Koch	Hans-Wolfgang	Member of the Executive Board HOCHTIEF AG
Lauk	Kurt-J.	President Wirtschaftsrat der CDU e.V.
Lindemann	Beate	Executive Vice-Chairman Atlantick Brück e.V.
Mitscherlich	Matthias	Chairman of the Executive Board Ferrostaal AG
Neumann	Jens	Member of the Board of Directors Volkswagen AG
Oppenheim	Alfred Freiherr von	Chairman of the Supervisory Board Bankhaus Sal. Oppenheim jr. & Cie.
Pordzik	Wolfgang	President & CEO Deutsche Post World Net USA Inc.
Priemer	Wolfgang	President Westfalia Parking-Systems GmbH & Co. KG
Ricke	Kai-Uwe	Chairman of the Group Board of Management Deutsche Telekom AG

Scheuble	Bernhard	Chairman and Chief Executive Officer Merck KGaA
Schmitt	Carl H.	Chairman of the Board Konvekta AG
Schreier	Bernhard	Chairman of the Management Board Heidelberger Druckmaschinen AG
Sharef	Uriel J.	Executive Vice President Siemens AG
Strube	Jürgen	Chairman of the Board of Executive Directors BASF Aktiengesellschaft
Thumann	Jürgen R.	Chairman of the Managing Board Heitkamp & Thumann KG
Wartenberg	Dr. Ludolf v.	Director General and Member of the Board Federation of German Industries (BDI)
Wörner	Coralie	Project Manager (North and Latin America) Federation of German Industries (BDI)
Wulf-Mathies	Monika	Head of Corporate Department Policy and Environment Deutsche Post AG
Zirbel	Sigrid	Regional Director for North and Latin America Federation of German Industries (BDI)

THE ASPEN INSTITUTE

April 1, 2003

The Honorable Diana DeGette
U.S. House of Representatives
Washington, DC 20515

Dear Diana:

I am writing to invite you and Lino to an important congressional conference on "The Convergence of U.S. National Security and the Global Environment," which will be held May 26-June 1, 2003 in Rome, Italy. Enclosed is the agenda. We hope you will put it on your calendar and plan to come.

We have recruited very distinguished scholars to lead the discussions. Sessions will focus on U.S. Climate Policy Post-Kyoto; The Impacts and Consequences of Climate Change; Market-based Approaches to Environmental Policy; and Charting a New Course in Oceans Policy. We will also have a luncheon on Corporate America and Sustainable Development.

The size of our foundation grant will permit us to accept only twenty Members of Congress as participants. Please complete the attached form and fax it to our office. It is very important that we hear from you as soon as possible.

Expenses for you and Lino, including coach-class airfare from Washington, lodging and meals will be paid by the Aspen Institute Congressional Program. We will stay at the Cavalieri Hilton Hotel. More information is available at www.cavalieri-hilton.com/.

Meetings are off-the-record and attendance is by invitation only, with no outside observers or congressional staff. Funding is provided solely by grants from major foundations—no government, private, foreign, corporate or special interest money is accepted.

Departure will be on Monday, May 26th and we will return to Washington on Sunday, June 1st. Should you accept our invitation, it is required that you participate through the duration of the conference. Enclosed is a fact sheet on the program. In addition to answering any questions you may have, it has proven to be useful in responding to public and press inquiries.

Dick Clark, Director | Congressional Program
One Dupont Circle, NW | Suite 700 | Washington, DC 20036-1133 | Phone 202.736.5825 | Fax 202.785.2737

THE ASPEN INSTITUTE
Congressional Program

The Convergence of U.S. National Security and the Global Environment

May 26-June 1, 2003
Rome, Italy

Monday, May 26

Participants depart on trans-Atlantic flights

Tuesday, May 27

Participants arrive during the day

7:00 pm Reception and dinner in the La Terrazza degli Aranci on the Roof Garden of the hotel

• MEETING SITE IS IN THE LE BELLE ARTI ON LEVEL B •

Wednesday, May 28

8:00 am	Orientation breakfast for scholars in the Sala Giardinetto on Level B at the Giardino Restaurant
8:00-9:00 am	Breakfast buffet in the Sala Ellisse on Level B
9:00 am	**The Framework of the Conference** Dick Clark
9:15 am	**U.S. Climate Policy Post-Kyoto** John Holdren, Harvard University **Discussion Questions:** *What is the current status of U.S. policy on climate? How sufficient is it with respect to what the emerging science says about the seriousness of climate change? What more might be useful?* *How is U.S. energy policy factoring into climate policy? What could or should the U.S. do in the energy area to help meet the climate change challenge?* *How should the United States relate to our allies on the climate issue? What about the developing world?* *What new or expanded initiatives might be useful internationally? Are there opportunities for bilateral collaboration or multilateral forums beyond those associated with the Kyoto Protocol?*
11:00 am	Coffee break
11:15 am	Policy implications from the morning discussion (Members of Congress)
12:30 pm	Buffet lunch in the Veranda on Level B
	Afternoon Free
5:30 pm	Reception in the Veranda
6:00 pm	Depart hotel for private tour of the Vatican and Sistine Chapel
8:00 pm	Dinner at the Les Etoiles Restaurant
10:00 pm	Return to hotel

Thursday, May 29

8:00-9:00 am	Breakfast buffet in the Sala Ellisse
9:00 am	**The Impacts and Consequences of Climate Change** Jerry Melillo, Marine Biological Laboratory, Woods Hole **Discussion Questions:** *What are the principal impacts expected from a warmer climate? How certain are these assessments?* *How will different parts of the world and the U.S. be affected? How will important economic sectors—such as agriculture, manufacturing, and transportation—be affected?* *What kind of measures might be taken to forestall some of these effects and at what cost? What strategies make sense for adapting to climate change and at what cost?* *How well organized are governments and international institutions to meet these challenges? What more is needed?*
11:00 am	Coffee break
11:15 am	Policy implications from the morning discussion (Members of Congress)
12:30 pm	Buffet lunch in the Veranda
2:00 pm	Depart hotel for afternoon walking tour of the Spanish Steps, Trevi Fountain, Gesu Church, Venezio Square, Pantheon and Palazzo Colonna
5:00 pm	Return to hotel
7:00 pm	Depart for reception and dinner at the Hotel Forum's Rooftop Restaurant
9:30 pm	Return to hotel

Friday, May 30

8:00-9:00 am	Breakfast buffet in the Sala Ellisse
9:00 am	**Market-Based Approaches to Environmental Policy** Paul Portney, Resources for the Future

Discussion Questions:

On what kind of environmental issues have market-based approaches been tried on the national or state level? With what success?

What do these experiences suggest for the design and implementation of effective market-based approaches to environmental policy? What pitfalls or hurdles are evident? What are the sources of opposition or skepticism about these approaches, and why?

What has the experience been in other countries with respect to market-oriented approaches? Is that experience transferable or adaptable to U.S. circumstances?

Which problems or issues are ripe for trying market-based approaches? How might they work? How responsive has the Environmental Protection Agency and other federal agencies been to trying them? How receptive have state environmental agencies been?

11:00 am	Coffee break
11:15 am	Policy implications from the morning discussion (Members of Congress)
12:30 pm	Buffet lunch in Sala Ellisse
	Corporate America and Sustainable Development George Carpenter, Procter and Gamble Company
	Afternoon Free
7:00 pm	Depart for Hotel Eden's Terrazza Giardini Restaurant
9:30 pm	Return to hotel

Saturday, May 31

8:00-9:00 am	Breakfast buffet in the Sala Ellisse
9:00 am	**Charting a New Course in Oceans Policy** Jane Lubchenco, Oregon State University **Discussion Questions:** *What are the major threats to ocean resources? What's behind these threats? Where are they most serious?* *What measures can be taken—and at what cost—to address excessive fishing and depletion of fisheries? How effectively do the national and international regimes that attempt to manage fisheries work?* *What can be done to stop the bleaching and other stresses affecting coral reefs? What about protection of marine mammals?* *What is the U.S. government now doing to combat threats to ocean resources? How successfully? What more is needed? How is the U.S. government organized to consider issues and policies affecting the oceans?*
11:00 am	Coffee break
11:15 am	Policy implications from the morning discussion (Members of Congress)
12:30 pm	Buffet lunch in the Veranda
2:00 pm	Depart hotel for afternoon tour of the Capitol Square, Forum and Colosseum
5:00 pm	Return to hotel
7:00 pm	Reception and dinner at La Terrazza degli Aranci on the Roof Garden of the hotel

Sunday, June 1

TRAVEL DAY

7:00-10:00 am	Breakfast (at your leisure) in the Giardino dell'Uliveto Restaurant and Cafe

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 4:07

HOUSE OF REPRESENTATIVES

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

Page No.

William D. Delahunt
(Full Name)

9 Ketch Lane Quincy, MA 02171
(Mailing Address)

202-225-3111
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: MA District: 10	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William D. Delahunt	May 17, 2004

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SCHEDULE I - EARNED INCOME

Name William D. Delahunt

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Commonwealth of Massachusetts Retirement System	Pension	$56,303

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name William D. Delahunt

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Citizen's Bank, Quincy, MA	$1,001 - $15,000	INTEREST	$201-$1,000	
	Commonwealth of Massachusetts Deferred Compensation Plan	$250,001 - $500,000	INTEREST	$5,001 - $15,000	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name William D. Delahunt

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Lexington Institute	Jan. 21-23	Miami-Havana-Miami	Y	Y	N	N/A
Lexington Institute	Mar. 7-11	Wash.,D.C--Miami-Havana-Miami--Wash	Y	Y	N	N/A
AFL-CIO Maritime Trade Department	Feb. 18-21	Boston - Ft. Lauderdale - Boston	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

17
MC
2004 MAY 14 PM 3:20
(Office Use Only)

Rosa L. DeLauro
(Full Name)

49 Huntington Street
(Mailing Address)

(202) 225-3661
Daytime Telephone:

New Haven , CT 06511

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rosa L. DeLauro	5/13/04

Name	Rosa L. DeLauro	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Greenberg Quinlan Rosner Research, Inc.	Spouse Salary	N/A
Greenberg Research, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Rosa L. DeLauro | Page 1 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPT'ED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC	*Examples:* Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	Chase Manhattan Escrow			X												X						X										
	Fleet,CT Scholarship Fund			X												X						X										
JT	United Bank Checking				X											X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rosa L. DeLauro

Page 2 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Merrill Lynch-Joint																															
	NM Ford Motor CDT Co. Bond			X												X						X										P
	NM Sears Roebuck & Co. Bond			X												X						X										P
	NM General Motors Bond			X												X						X										P
	Federal Home Ln Mtg Corp.Bond				X																X											P
	Diamonds Trust Series I				X									X			X							X								P/S
	IShares TR Rus 2000			X										X			X						X									P/S
	Midcap SPDR TR Ser I			X										X			X						X									P/S
	Nasdaq 100 TR Unit Ser I				X									X			X							X								P/S
	Standard & Poors Dep RCPT				X									X			X									X						P/S
	American Wash. Mutual	X												X									X									S
	CMA- Cash MMF			X										X								X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name Rosa L. DeLauro

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Merrill Lynch																															
	Federal Home Ln Mtg Corp Bond			X																	X											P
	NM Ford Motor CDT Co. Bond			X												X						X										P
	NM General Motors Bond			X												X						X										P
	NM Sears Roebuck & Co. Bond			X												X						X										P
	Diamonds Trust Series I			X										X			X						X									P/S
	IShares TR Rus 2000			X										X			X					X										P
	Midcap SPDR TR Ser I			X										X			X					X										P
	Nasdaq 100 TR Unit Ser I			X										X			X					X										P/S
	Standard & Poors DEP RCPT				X									X			X						X									P/S
	CMA-Cash MMF			X												X						X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name Rosa L. DeLauro

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	TIAA Retirement					X										X									X							
SP	CREF Retirement					X											X										X					
	TIAA Retirement				X											X								X								
	CREF Retirement					X											X										X					

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rosa L. DeLauro

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Annunity Unit Shares In																															
	Manulife Financial Corp.																															
	(Insurance Company)																															
	Greenberg Quinlan Rosner																															
	Research 401(k) Plan:																															
	Sub-Advisors:																															
	MFC Pimco Total Return				X												X							X								P
	MFC Weitz Partner Value				X												X									X						P
	MFC Franklin Balance Sheet				X												X									X						P
	MFC Lord Abbott Mid Cap Value				X												X									X						P
	MFC Scudder RREEF Real Estate				X												X									X						P
	MFC Excelsior Value & Res				X												X									X						P
*	MFC Lord Abbott All Value				X												X									X						P
	MFC Prudential Jennison Grwth				X												X									X						P
	MFC Templeton Foreign				X												X									X						P
**	MFC Aim Small Cap Grwth				X												X									X						P
	SM Cap Index Fund				X												X									X						P
*	Previously MFC Dreyfus Strat Value																															
**	Previously MFC Lord Abbott Dev Grwth																															

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name Rosa L. DeLauro

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	The following asset is held in joint name with mother, Louise DeLauro, for estate purposes only. Asset is under control of and all income is reported by joint tenant, Louise DeLauro.																															
	Fleet Checking			X																												

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rosa L. DeLauro

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
SP	Greenberg Quinlan Rosner Research Inc. 67% owner 10 G Street, NE Wash, DC Polling/consulting services	J	SEE STATEMENT I	I	
SP	Greenberg Research, Inc. 100% Owner 10 G Street, NE Wash. DC Strategic Consulting	F	SEE STATEMENT II	I	
SP	Sun Surveys, LLC 60% Owner 9425 Sunset Drive, Miami FL Phone Surveys	C	INTEREST	II	

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Name Rosa L. DeLauro | Page 1 of 5

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
JT	Merrill Lynch														
	Diamonds Trust Series I	X			5/29/03		X								
	IShares TR Rus 2000	X			5/29/03	X									
	Midcap SPDR TR Ser I	X			5/29/03	X									
	Nasdaq-100 Trust SM	X			5/29/03		X								
	Standard & Poors DEP RCPT	X			5/29/03			X							
	NM Ford Motor CDT Co. Bond	X			6/25/03	X									
	NM Sears Roebuck & Co. Bond	X			6/25/03	X									
	NM General Mtrs Accpt Bond	X			7/09/03	X									
	Standard & Poors DEP RCPT	X			9/05/03		X								
	Federal Home Ln Mort Corp. Bond	X			9/15/03		X								

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SCHEDULE IV — TRANSACTIONS

Name Rosa L. DeLauro

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10-12-03		X								
JT	Merrill Lynch														
	Davis Ser Finan Fund B		X		5/28/03	X									
	Pimco Pea Innovation FD		X		5/28/03		X								
	Putnam Voyager Fund II		X		5/28/03		X								
	American Washington Mutual Invst		X		5/28/03			X							
	Diamond Trust Series I		X		6/20/03	X									
	IShares TR Rus 2000		X		6/20/03	X									
	Midcap SPDR Tr Ser I		X		6/20/03	X									
	Nasdaq-100 Trust SM		X		6/20/03	X									
	Standard & Poors DEP RCPT		X		6/20/03	X									
	Diamonds Trust Series I		X		9/09/03	X									
	IShares TR Rus 2000		X		9/09/03	X									
	Midcap SPDR TR Ser I		X		9/09/03	X									
	Nasdaq-100 Trust SM		X		9/09/03	X									
	Standard & Poors DEP RCPT		X		9/09/03			X							

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name Rosa L. DeLauro

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Merrill Lynch														
	Diamonds Trust Series I	X			6/12/03	X									
	IShares TR Rus 2000	X			6/12/03	X									
	Midcap SPDR TR SER I	X			6/12/03	X									
	Nasdaq-100 Trust SM	X			6/12/03	X									
	Standard & Poors DEP RCPT	X			6/12/03		X								
	NM Ford Motor CDT Co. Bond	X			6/25/03	X									
	NM Sears Roebuck & Co. Bond	X			6/25/03	X									
	NM General Mtrs ACCPT Bond	X			7/09/03	X									
	Federal Home LN Mort Corp. Bond	X			9/15/03	X									

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name: Rosa L. DeLauro

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Merrill Lynch														
	Aim Premier Equity Fund CL B		X		6/12/03	X									
	ML Fundamental Growth Fund B		X		6/12/03	X									
	Aim International Growth Fund B		X		6/12/03	X									
	ML Global Value FD CL B		X		6/12/03	X									
	Aim Blue Chip FD CL B		X		6/12/03	X									
	Standard & Poors DEP RCPTS		X		6/20/03	X									
	Diamond Trust Series I		X		6/20/03 & 9/09/03	X									
	Standard & Poors DEP RCPTS		X		9/09/03	X									
	Nasdaq-100 Trust SM		X		6/20/03 & 9/9/03	X									

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Name Rosa L. DeLauro

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
SP	Annuity Unit Share In Manulife Financial Corp														
	Greenberg Quinlan Rosner Research 401(k) Plan														
	MFC Pimco Total Return	X			Monthly	X									
	MFC Weitz Partner Value	X			Monthly	X									
	MFC Franklin Balance Sheet	X			Monthly	X									
	MFC Lord Abbott Mid Cap Value	X			Monthly	X									
	MFC Scudder RREEF Real Estate	X			Monthly	X									
	MFC Excelsior Value & Res	X			Monthly	X									
	MFC Lord Abbott All Value	X			Monthly	X									
	MFC Prudential Jennison Growth	X			Monthly	X									
	MFC Templeton Foreign	X			Monthly	X									
	MFC Aim Small Cap Growth	X			Monthly	X									
	Small Cap Index Fund	X			Monthly	X									

This page may be copied if more space is required.

Name	Rosa L. DeLauro	Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Citicards, S. Hackensack , NJ	Revolving Charge Account		X								
JT	Bank of America, Carol Stream , IL	Revolving Charge Account		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name Rosa L. DeLauro

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Fellow	Timothy Dwight College- Yale University
Director	Women's Campaign School - Yale University
Honorary Board Member	Special Olympics- Connecticut
Advisory Board Member	Sisters Journey

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

Rosa L. DeLauro
49 Huntington Street
New Haven, CT 06511

House of Representatives, CT, 3rd District

ATTACHMENTS: BASIS OF VALUATION

Statement I, Schedule III, Page 7:

Greenberg Quinlan Rosner Research Inc. – Ownership value based on an independent business valuation.

Statement II, Schedule III, Page 7:

Greenberg Research, Inc. – Ownership value based on an independent business valuation.

HAND DELIVERED

(10)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 10

For use by Members, officers, and employees

Thomas Dale DeLay
(Full Name)

H-107, The Capitol Washington, DC 20515
(Mailing Address)

202-225-4000
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: TX District: 22	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas Dale DeLay	5-12-04

SCHEDULE I - EARNED INCOME

Name Thomas Dale DeLay

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Americans for a Republican Majority	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Dale DeLay

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Exxon Mobile Common Stock	$50,001- $100,000	Dividends	$1,001 - $2,500	
JT	Congressional Credit Union	$1 - $1,000	Interest	$1 - $200	
JT	Wells Fargo Bank	$1,001 - $15,000	Interest	NONE	
JT	Charles Schwab MM	$15,001 - $50,000	Interest	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Thomas Dale DeLay

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Exxon Mobile Common Stock (series of dividend reinvestments, total greater than $1,000)	P	03-10-03 06-10-03 09-10-03 12-10-03	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Thomas Dale DeLay

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Bracewell & Patterson LLP Houston, TX	Legal Expenses	$50,001 - $100,000

SCHEDULE VI - GIFTS

Name Thomas Dale DeLay

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
See Attached List	Contributions to Legal Expense Trust Fund (Legal expense trust fund reports have been previously disclosed in public records filed at legislative resources.)	See list

The Tom Delay Legal Expense Trust
Detail for Contributions over $285
January 1, 2003 - December 31, 2003

Donor Corporations	Amount
Reliant Energy Incorporated Houston, TX	$ 5,000.00
International Integrated Industries, LLC Las Vegas, NV	$ 5,000.00
Bayou Leader PAC Alexandria, VA	$ 5,000.00
R.J. Reynolds Tobacco Co. Winston-Salem, NC	$ 5,000.00
Superior California State Leadership Fund Sacramento, CA	$ 5,000.00
Edward G. Atsinger, III Camarillo, CA	$ 5,000.00
Mallory Factor, Inc. New York, NY	$ 1,000.00
Rosswil, LLC Chicago, IL	$ 5,000.00
Penpac Anderson, IN	$ 500.00
Compac ADF-Restricted Washington, DC	$ 5,000.00
Total Corporations	$ 41,500.00

The Tom Delay Legal Expense Trust
Detail for Contributions over $285
January 1, 2003 - December 31, 2003

Donor Corporations	Amount

Donor Individuals	Amount
Joseph J. Adams Houston, TX	$ 5,000.00
Jeffrey A. & Kathy L. Fedorchak Fairfax, VA	$ 2,000.00
Walter Gezari Calverton, NY	$ 5,000.00
Total Individuals	$ 12,000.00
Total	**$ 53,500.00**

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Thomas Dale DeLay

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Leadership Institute	Jan. 29-31	Wash DC-St. Michaels, MD-Wash DC	Y	Y	N	N
The DeLay Foundation for Kids	Mar. 14	Virginia Beach-West Palm Beach	N	N	N	N
NASDAQ (Transportation) eBay (Lodging & Food)	Mar. 28-29	Houston-Key Biscayne, FL-Houston	Y	Y	N	N
The DeLay Foundation for Kids	Apr. 11-19	Wash DC-Miami-Houston	Y	Y	Y	N
The DeLay Foundation for Kids	May 16-19	Pittsburgh-Providence-Westerly, RI-West Hampton, NY-Westerly-Providence-Wash DC	Y	Y	N	N
Center for Popular Culture	Nov. 13-16	Wash DC-Miami-Ft.Lauderdale-Wash DC	Y	Y	Y	N

SCHEDULE VIII - POSITIONS

Name Thomas Dale DeLay

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman	Americans for a Republican Majority
Chairman	Business Leadership Trust

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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Jamer W. DeMint
(Full Name)
132 Coventry Rd
Greenville, SC 29615
(Mailing Address)
864-232-1141
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: SC District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jim DeMint	5/4/04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (Dividends; Rent; Interest; Capital Gains; Excepted Trust; Qualified Blind Trust; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp. Stock	E	Dividends	IV	P
DC	Simon & Schuster	Indefinite	Royalties	IX	
JT	1st Bank of Paducah, KY accounts	F	Interest	VI	
	Mainstay (IRA)	D	Dividends	IV	
	Solomon SB (IRA)	D	Dividends	IV	
	TSP Plan	D	Dividends	VI	
SP	Solomon SB (IRA)	C	Dividends	III	
SP	BB&T Corp	D	Dividends; Capital Gains	III	
SP	Wachovia	A	Dividends	IV	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jim DeMint

Page 3 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B [redacted]	C $1,001 – $15,000	D [redacted]	E $50,001 – $100,000	F [redacted]	G $250,001 – $500,000	H [redacted]	I $1,000,001 – $5,000,000	J [redacted]	K $25,000,001 – $50,000,000	L [redacted]	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II [redacted]	III $201 – $1,000	IV [redacted]	V $2,501 – $5,000	VI [redacted]	VII $15,001 – $50,000	VIII [redacted]	IX $100,001 – $1,000,000	X [redacted]	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Datastream	X																			X											
	100% share: DeMint Mkt. Mgt. Inc.					X															X											

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Name [signature] Page 4 of 5

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–03		X								
SP	Datastream (loss)		✓		11-17-03	X									
SP	Datastream (loss)		✓		11-17-03	X									
SP	Wachovia		✓		11-17-03	X									
SP	Wachovia		✓		11-17-03	X									

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Greenville Family Partnership (non-profit drug prevention org.)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1984	DeMint Marketing Management	Upon my death, the proceeds of the life insurance policy disclosed on Schedule III (100% share of DeMint Mkt. Mgt.) would be used to buy the business from my wife.

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 11 PM 5:19
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC

Lincoln Diaz-Balart
(Full Name)
8525 N.W. 53 Rd. Terrace
(Mailing Address)
Miami, Fla. 33178
Daytime Telephone: (305) 470-8555

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-11-04

Name Lincoln DIAZ-BALART | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	TRANSATLANTIC BANK, MIAMI, FLA.	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

Name Lincoln Diaz-Balart | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP	Mega Corp. Stock					X								X										X								P
		Simon & Schuster		Indefinite																	Royalties									X			
		1st Bank of Paducah, KY accounts						X									X									X							
JT	6920 S.W. 94 AVENUE MIAMI, FLA 33173								X																								
JT	900 N. STAFFORD ARLINGTON, VA							X																									
	Fidelity PURITAN FUND				X										X									X									
SP	AG Edwards + Sons				X										X									X									
SP	Citibank Savings				X												X						X										
	1993 Ford				X																												

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Lincoln DIAZ-BALART | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	The New England Life Insurance Policy		X					X					X					
SP	Morgan Stanley Retirement Plan		X					X					X					

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SCHEDULE IV — TRANSACTIONS

Name Lincoln DIAZ-BALART | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	N/A														

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	UNION PLANTERS	MORTGAGE 6920 SW 94 AVE., MIAMI, FL		X			
JT	GMAC MORTGAGE	MORTGAGE 900 N. STAFFORD, ARL, VA	X				
JT	BANK OF AMERICA	Line of Credit	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	CYPRUS Federation of AMERICA	AUG. 14-21	MIAMI – CYPRUS – MIAMI	Y	Y	Y	
	US.– MOROCCO COUNCIL ON TRADE AND INVESTMENT	AUG. 20-21	CYPRUS - CASABLANCA – NEW YORK	Y	Y	Y	

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 11 PM 2:19
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Mario Diaz-Balart
(Full Name)

7270 NW 6 Street
Miami, FL 33126
(Mailing Address)

305-225-6866
Day-time Telephone

HAND DELIVERED MC
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State: FL District: 25	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☒	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/7/2004

1156

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
U.S. House of Representatives	Legislative Salary	$132,912.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source		Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income					Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP	Mega Corp. Stock					X								X										X							P
		Simon & Schuster		Indefinite																	Royalties								X			
		1st Bank of Paducah, KY accounts						X									X									X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Name Mario Diaz-Balart | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset															BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None		C $1,001 – $15,000		E $50,001 – $100,000		G $250,001 – $500,000		I $1,000,001 – $5,000,000		K $25,000,001 – $50,000,000			DIVIDENDS		INTEREST		EXCEPTED TRUST		Other Type of Income (Specify)	I None		III $201 – $1,000		V $2,501 – $5,000		VII $15,001 – $50,000		IX $100,001 – $1,000,000		XI Over $5,000,000	P, S, E

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SCHEDULE IV — TRANSACTIONS

Name Mario Diaz-Balart | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	A $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:*	Mega Corporation Common Stock	X			10–12–03		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	First U.S.A. Bank Visa	Credit Card					
	Wacovia Bank	Boat Loan	X				
	Bank of America	Line of Credit	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Cyprus Federation of America	Aug. 13-17	Miami - New York - Greece - Cyprus - New York - Miami	Y	Y	N	N
	U.S. Morocco Council on Trade + Investment	Aug. 20-22	Larnaca (Cyprus) Casablanca - New York	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Congressman	U.S. House of Representatives

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A — For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 17 PM 12: 34

(Office Use Only)

MC

NORMAN D. DICKS
(Full Name)

2467 RAYBURN HOB WASHINGTON, DC 20515
(Mailing Address)

202-225-5916
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative — State: WA District: 06	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15) ☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Norman D. Dicks	5,13,2004

1165

SCHEDULE I - EARNED INCOME

Name NORMAN D. DICKS

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
US Capitol Historical Society	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name NORMAN D. DICKS

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	Massachusetts Mutual Life Ins, Panorama Premier, American Century VP Value Springfield, MA IRA	$15,001 - $50,000		NONE	
	Massachusetts Mutual Life Ins, Panorama Premier, American Century VP Value Springfield, MA IRA	$15,001 - $50,000		NONE	
SP	Lincoln Life, P.O. Box 2340, Fort Wayne, IN 46801 Annuity	$15,001 - $50,000	None	NONE	
	Wright Patman CFCU, Washington, DC account	$1,001 - $15,000	INTEREST/INTEREST	$1 - $200	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name NORMAN D. DICKS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
NASDAQ	Mar. 28-31	DC-Miami-DC	Y	Y	Y	N/A
NORTHROP GRUMMAN CORP	Nov 10 - 12, 2003	Seattle-Los Angeles-DC	Y	Y	N	N/A

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MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

John D. Dingell
(Full Name)

2328 Rayburn HOB Washington, DC 20515
(Mailing Address)

202-225-4071
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: MI District: 15 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☑ No ☐

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John D. Dingell	5/17/04

SCHEDULE I - EARNED INCOME

Name John D. Dingell

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
General Motors Corp	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Adams Express Co Maryland	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
SP	AIM Aggressive Growth Fund Class A	$1,001 - $15,000			
JT	Alliance Bernstein Premier Growth Fund (name addition)	$15,001 - $50,000			
SP	Apple Computer Inc	$1,001 - $15,000			
JT	Bank of America Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Bank One	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

	Bergstrom Cap Corp	None			Other
JT	Brandywine Fund Inc	$15,001 - $50,000			
SP	Cincinnati Bell Inc (formerly Broadwing Inc.)	$1,001 - $15,000			
	Citibank NA Bank Deposit Program	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Citigroup Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Columbia Acorn Fund Z (formerly Liberty Acorn Fund Z)	$50,001 - $100,000	CAPITAL GAINS	$1 - $200	
JT	Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Conoco Phillips	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
SP	Cummins Inc	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Davis New York Venture Fund	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
SP	Delphi Corp	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Dodge and Cox Stock Fund	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	P
	EI DuPont DeNemours & Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Electronic Data Sys Corp New	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

SP	EMC Corp-Mass	$1,001 - $15,000			
	Gabelli Asset Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	
JT	General Electric Co	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	General Motors Corp	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
SP	General Motors Corp Stock Options	$1,000,001 - $5,000,000			
SP	General Motors Pension Fund	N/A as pension is vested			
SP	General Motors Savings-Stock Purchase Program (SSPP)	$500,001 - $1,000,000			
	Heartland Value Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	
SP	Hughes Electronic Corp (General Motors Corp CL H split and became Hughes and News Corp)	$1,001 - $15,000			
SP	Ingersoll Rand Co	$1,001 - $15,000			
SP	Intel Corp	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Istar Finl Inc	$1,001 - $15,000	/DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P
	Johnson & Johnson	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

JT	Kent Hospital Fin Auth Mich Bond	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
JT	Legg Mason Value Trust	$50,001 - $100,000			
SP	Marsh & McLennan Cos Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Merck & Co Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Mutual Beacon	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
JT	Mutual Qualified	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
JT	Mutual Shares	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	News Corp LTD Spon ADR (General Motors Corp CL H split and became news Corp and Hughes Electronics)	$1,001 - $15,000			
JT	Nicholas Fund, Inc.	$15,001 - $50,000			
	Oppenheimer Global Fund	$1,001 - $15,000			
SP	Pfizer Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	PIMCO Innovation Fund	$1,001 - $15,000			
SP	Praxair Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

SP	Procter & Gamble Co	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Putnam Voyager Fd Inc	$1,001 - $15,000			
JT	Smith Barney Appreciation Fund Class A	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
JT	Smith Barney Municipal Money Market Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
	Spectra Fund	$1,001 - $15,000			
JT	The Torray Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	Time Warner Inc (dropped AOL from their name)	$1,001 - $15,000			
SP	Tyco International LTD	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	UTS GMAC Def Int Deb-Princpl	$15,001 - $50,000			
	UTS Uncommon Values TR # 2003 A Annl PMT Series	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	UTS Uncommon Values TR #2002 A ANNL PMT Series	None			S
	VanKampen Emerging Growth Fund	$1,001 - $15,000			
JT	Wachovia Bank (formerly First Union)	$100,001 - $250,000	INTEREST	$1 - $200	
JT	Wachovia Securities	$15,001 - $50,000			

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name John D. Dingell

SP	Wal-Mart Stores Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Washington Mutual Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
JT	Waste Mgmt Inc Del	None			S
SP	Wells Fargo & Co	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE IV - TRANSACTIONS

Name John D. Dingell

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Conoco Phillips	P	9-8-03	$15,001 - $50,000
	El DuPont DeNemours & Co	P	9-8-03	$1,001 - $15,000
	Johnson & Johnson	P	9-8-03	$1,001 - $15,000
JT	Washington Mutual Inc	P	9-8-03	$15,001 - $50,000
	UTS Uncommon Values TR # 2003 A Annl PMT Series	P	7-24-03	$15,001 - $50,000
SP	Wells Fargo & Co	P	9-8-03	$1,001 - $15,000
	Istar Finl Inc	P	9-8-03	$1,001 - $15,000
	Adams Express Co Maryland	P	11-24-03	$1,001 - $15,000
	UTS Uncommon Values TR # 2002 A ANNL PMT Series	S	7-24-03	$15,001 - $50,000
JT	Waste Mgmt Inc	S	6-19-03	$1,001 - $15,000
	Dodge & Cox Stock Fund	P	8-27-03	$1,001 - $15,000
	Bergstrom Cap Corp	Other	4/1/03-6/30/03	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name John D. Dingell

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Greater Detroit Chamber of Commerce	May 27-June 1	Detroit, MI-Mackinac, MI-Detroit, MI	Y	Y	Y	2 days
Ford Motor Co	June 13-14	Dulles, VA-Detroit, MI	Y	Y	Y	no

FOOTNOTES

Name John D. Dingell

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	The company dissolved and did a cash liquidation to stock holders from 4/03-6/03	Bergstrom Cap Corp

HAND DELIVERED

LEGISLATIVE RESOURCE CE

2004 MAY 17 AM 11: 3

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Lloyd Doggett
(Full Name)

1200 Baylor, #401 Austin, TX 78703
(Mailing Address)

202-225-4865
Daytime Telephone.

Filer Status	☑ Member of the U.S. House of Representatives — State: TX, District: 10	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4 § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lloyd Doggett	5/17/04

SCHEDULE I - EARNED INCOME

Name Lloyd Doggett

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Texas ERS	Annuity	$48,627
The Education Trust, Inc.	Spouse Salary	N/A
Georgetown University	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	21.12 Acres, Northern Dona Ana City, NM (1/24 interest)	$1,001 - $15,000	RENT	$1 - $200	
	220 N. Mesa, El Paso, TX (1/12 interest)	$15,001 - $50,000	RENT	$1,001 - $2,500	
	3800 Kennelwood, Austin, TX	$250,001 - $500,000			
	6734 Spicewood Springs	$1,000,001 - $5,000,000	RENT	$15,001 - $50,000	
	711 N. Piedras, El Paso, TX (1/12 interest)	$1,001 - $15,000	RENT	$201 - $1,000	
	8.16 acres Lohman's Ford Crossing Rd., Travis Co., TX	$15,001 - $50,000			

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	American Century 20th Ultra Shares	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Apache Corp	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Applied Materials Inc	$15,001 - $50,000			
	AT&T Corp Com	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Bank of America Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Baxter International	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Bristol-Myers Squibb Co	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Burlington Northern Santa Fe Common	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Charles Schwab Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Checkpoint Software	$1,001 - $15,000			
	ChevronTexaco Corp Com	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Cincinnati Bell (formerly Broadwing Inc.)	$1,001 - $15,000			
	Cisco Systems Inc	$15,001 - $50,000	DIVIDENDS		
	Citigroup Inc Com	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	Coca-Cola Company	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Comcast (AT&T merger)	$1,001 - $15,000	INTEREST		
	Computer Sciences Corp	$15,001 - $50,000			
	Congressional Federal Credit Union	$50,001 - $100,000	INTEREST	$201 - $1,000	
	Credit Suisse Cap Apprec Fund	$50,001 - $100,000			
	Cypress-Frbnks TX Indep School District Due 2/15/06	None	INTEREST/INTEREST	$201 - $1,000	S
	Dell Computer Corp	$1,001 - $15,000			
	Doubleclick Inc Com	$1,001 - $15,000			
	Edwards A.G. Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	El Paso Corp Com	None	DIVIDENDS	$1 - $200	S
	Estate of Bates Belk	$250,001 - $500,000	DIVIDENDS	$1,001-$15,000	
	Exxon Mobil Corp Com	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	P
	First Data Corp Common	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Franklin Mutual Shares Fund	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	General Electric Co Com	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Guidant Corp Com	$15,001 - $50,000		$1 - $200	
	Home Depot Inc Com	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Honeywell international	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	INSD MUN INCM TR SR 86 Semi-Annual	$1,001 - $15,000	INTEREST	$1 - $200	
	Intel Corp Com	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	International Business Machines	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	
	International Paper Co	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Invesco Small Co. Growth	$100,001 - $250,000			
	Invesco Total Return Fund (formerly Balanced Fund	$100,001 - $250,000	DIVIDENDS	$201 - $1,000	
	J P Morgan Chase & Co Com (formerly Chase Manhattan)	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	P
	Janus Fund	$100,001 - $250,000			
	Janus Twenty Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Janus US Value Fund (formerly Vontobel)	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Lloyd Doggett

	JDS Uniphase Corp	$1,001 - $15,000			
	Jensen Portfolio Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Johnson & Johnson	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Lewisville TX Indep School District Due 8/15/07	$15,001 - $50,000			
	Liberty Bank	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
	Lucent Technologies Inc Com	$1,001 - $15,000	DIVIDENDS		
	Luminex Corp Com New	$15,001 - $50,000			
	MBNA Corp	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Medco Health Solutions (Merck spinoff)	$1,001 - $15,000			S
	Merck & Co Inc	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	
	Mineral Interest, McFarland Tract, Ward Co., TX	$1,001 - $15,000	ROYALTY	$1 - $200	
	NCR Corp Com	None			S
	Newfield Expl. Co (merger-formerly EEX Corp)	$1,001 - $15,000			
	Nokia Corp Sponsored ADR	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	Nuveen Bond Fund Shares	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Nuveen Muni Adv Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	Oakmark International Fund	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	P
	Oppenheimer Multi Sector Income Tr	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
	Oracle Corp Com	$15,001 - $50,000			
	Pfizer Inc	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	PPG Industries Inc	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	Price Science and Technology	$100,001 - $250,000		NONE	
	Proctor & Gamble Co	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Raytheon Co Com New	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Royal Dutch Pete Co NY	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	SBC Communications Inc	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	Schlotzskys Inc	$1,001 - $15,000			
	Schwab Muni Money Fund	$250,001 - $500,000	DIVIDENDS	$2,500 - $5,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	Selected American Shares	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Texas Instruments Inc	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	TIAA-CREF Retirement	$15,000 - $50,000	DIVIDENDS	$1,001 - $2,501	P
	Time Warner Inc Com (formerly AOL Time Warner)	$1,001 - $15,000			
	TX INSD MUN INCM TR SER 31 Monthly	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Union Pacific Corp	$1,001 - $15,000	DIVIDENDS	$201 - $500	
	Vanguard Convertible Securities	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	P
	Vanguard Growth Index Fund Admiral	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	P
	Vanguard Int. Term Tax-Exempt Fund	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	P
	Vanguard Long-Term Corp Admiral	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	
	Vanguard Ltd. Term Tax-Exempt Fund	$50,001 - $100,000	DIVIDENDS	$1 - $200	P
	Vanguard PRIMECAP Fund Admiral	$250,001 - $500,000	DIVIDENDS	$1,001 - $2,500	P
	Vanguard Selected Value Fund	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	P
	Vanguard Small-Cap Index Fund Inv	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lloyd Doggett

	Vanguard Tax Exempt MM Fund	$100,001 - $250,000	DIVIDENDS	$1 - $200	S
	Vanguard Total Stock Market Idx Inv	$250,001 - $500,000	DIVIDENDS	$2,501 - $5,000	P
	Vanguard U.S. Growth Fund Admiral	$500,001 - $1,000,000	DIVIDENDS	$1,001 - $2,500	P
	Vanguard Wellesley Income fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Verizon Communications Com	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
	Viacom Inc Class B	$15,001 - $50,000		$1 - $200	
	Washington Mutual	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Waste Management Inc	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Weitz Value Fund	$100,001 - $250,000	DIVIDENDS	$1,001 - $2,500	P
	Whole Foods Mkt Inc	$250,001 - $500,000			
	Williams Cos Inc Com	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Xerox Corporation	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Lloyd Doggett

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Exxon Mobil Corp	P	Periodic Investment	$1,001 - $15,000
	Franklin Mutual Shares Fund	P	Periodic Investment	$1,001 - $15,000
	J P Morgan Chase	P	Periodic Investment	$1,001 - $15,000
	PPG Industries	P	Periodic Investment	$1,001 - $15,000
	Procter & Gamble	P	Periodic Investment	$1,001 - $15,000
	Janus US Value Fund	P	Periodic Investment	$15,001 - $50,000
	Oakmark International Fund	P	Periodic Investment	$1,001 - $15,000
	Weitz Value Fund	P	Periodic Investment	$1,001 - $15,000
	Vanguard Tax-Exempt MM Fund	S	03-10-03	$50,001 - $100,000
	Vanguard Convertible Securities	P	Periodic Investment	$15,001 - $50,000
	Vanguard Growth Index Fund Admiral	P	Periodic Investment	$1,001 - $15,000
	Vanguard U.S. Growth Fund Admiral	P	Periodic Investment	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Lloyd Doggett

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Vanguard Int. Term Tax-Exempt Fund	P	3-10-03 /Periodic Investment	$15,001 - $50,000
	Vanguard Ltd. Term Tax-Exempt Fund	P	3-10-03/Periodic Investment	$15,001 - $50,000
	Vanguard PRIMECAP Fund Admiral	P	Periodic Investment	$1,001 - $15,000
	Vanguard Selected Value Fund	P	Periodic Investment	$1,001 - $15,000
	Vanguard Total Stock Market Ind Inv	P	Periodic Investment	$15,001 - $50,000
	El Paso Corp	S	12-31-03	$1,001 - $15,000
	Medco Health Solutions	S	10-14-03	$1,001 - $15,000
	NCR Corp	S	12-31-03	$1,001 - $15,000
	Vanguard Wellesley Income Fund	P	Periodic Investment	$1,001 - $15,000
	Cypress-Fairbanks TX Indep School District Due 2/15/06	S	2-15-03	$1,001 - $15,000
	TIAA-CREF Retirement	P	Monthly	$1,001 - $15,000
	Nuveen Muni Adv Fund	P	Dividend Reinvestment	$1,001 - $2,000

SCHEDULE V - LIABILITIES

Name Lloyd Doggett

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Liberty Bank, Austin	Letter of Credit on 6734 Spicewood Springs	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Lloyd Doggett

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Managementand Development Institute	Jan. 12-25,2003	Wash., D.C.--Thailand--Cambodia--Singapore--Wash., D.C.	Y	Y	Y	7 days
The Congressional Program of the Aspen Institute	May 23-June 2, 2003	Wash., D.C.--Italy--Wash., D.C.	Y	Y	Y	4 days
Aspen Institute	Aug. 8-24, 2003	Wash., D.C.--Moscow, Russia--Wash., D.C.	Y	Y	Y	9.5 days

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A — For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 AM 9:56

(Office Use Only)

Calvin Millard Dooley (Full Name)	
1023 Langley Hill Drive McLane, VA 22101 (Mailing Address)	202-225-3341 Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives — State: CA District: 20	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Calvin Dooley	5/17/04

SCHEDULE I - EARNED INCOME

Name Calvin Millard Dooley

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Bryce Harlow Foundation	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Calvin Millard Dooley

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Advanced Micro Devices (AMD)	$1,001- $15,000	NONE	NONE	
	American Funds: Europathic Growth Funds	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	
	American Funds: The Investment Co. Of America	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$1,001 - $2,500	
	American Funds: New Perspective Fund	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	
	American Funds: The New Economy Fund	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Calvin Millard Dooley

	American Funds: Washington Mutual Investors Fund	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS	$1,001 - $2,500	
	Checkfree	None	NONE	NONE	S
	Congressional Federal Credit Union	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Dooley Farms Partnership (inc. Equipment, crops, leased improvements in Visalia and Tulare	$100,001 - $250,000	Farm income $100,001- $1,00,000 (net); $100,001 - $1,000,000 (gross)	See Previous Box	
	CalCot Limited	$1,001 - $15,000	Combined with farm income listed above	NONE	
	County Line Gin	$1,001 - $15,000	Combined with farm income, listed above	NONE	
	Diamond Walnut	$1,001 - $15,000	Combined with farm income, listed above	NONE	
	E-Loan Inc.	$15,001 - $50,000	NONE	NONE	P
	Ebay	$1,001 - $15,000	NONE	NONE	
	Genetech	$15,001 - $50,000	NONE	NONE	P
	Geron	$1,001 - $15,000	NONE	NONE	S,P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Calvin Millard Dooley

	McKesson	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	
	PIMCO RCM Biotechnology	$1,001 - $15,000	NONE	NONE	S,P
	Robt. Stephens Info. Age	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	
	Schwab- 1000 Fund	$50,001 - $100,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	S,P
	Schwab-MM Smallcap	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Schwab-Money Market	$100,001 - $250,000	INTEREST	$2,501 - $5,000	
	Schwab-S&P 500	$50,001 - $100,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	S,P
	Scudder Latin America	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS	$201 - $1,000	
	American On Line (AOL)	None	NONE	NONE	S
	Monsanto	$1,001 - $15,000	NONE	NONE	P

SCHEDULE IV - TRANSACTIONS

Name Calvin Millard Dooley

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	America On Line (AOL)	S	8-29-03	$1,001 - $15,000
	Monsanto	P	12-19-03	$1,001 - $15,000
	E-Loan	P	6-16-03	$1,001 - $15,000
	Geron	S	1-23-03	$1,001 - $15,000
	Geron	P	3-18-03	$1,001 - $15,000
	Checkfree	S	8-29-03	$15,001 - $50,000
	Schwab 1000 Fund	S	8-29-03	$15,001 - $50,000
	Schwab 1000 Fund	P	10-15-03	$15,001 - $50,000
	Schwab S&P 500	S	8-29-03	$15,001 - $50,000
	Schwab S&P 500	P	10-15-03	$15,001 - $50,000
	PIMCO RCM Biotechnology	S	8-29-03	$1,001 - $15,000
	PIMCO RCM Biotechnology	P	10-15-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Calvin Millard Dooley

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member included? (Y/N)	Any time not at sponsor's expense
US-New Zealand Council	Jan 10-19	Wash., DC--Los Angeles--Auckland, NZ--Wellington, NZ-- Christchurch, NZ--Queenstown, NZ--Los Angeles-Wash., DC	Y	Y	Y	N/A
Croplife America	Feb. 21-24	Wash., DC- West Palm Beach, FL-Wash., DC	Y	Y	Y	N/A
American Australian Education Dialogue	August14-16	Wash., DC--Los Angeles--Sydney, AU--Melbourne, AU--Cairns, AU--Sydney, AU--Los Angeles--Wash.DC	Y	Y	Y	10 days
Amcham-Costa Rican-American Chamber of Commerce	Nov. 7-12	Wash., DC--San Jose, Costa Rica--Wash. DC	Y	N	Y	N/A
New Democrat Network, Bay Area Conference	Nov. 13-14	Wash, DC--San Francisco--Wash. DC	Y	Y	N	N/A
New Democrat Network, LA Launch	July 18 -19	Wash, DC--Los Angelas--Wash, DC	Y	Y	N	N/A

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SCHEDULE VIII - POSITIONS

Name Calvin Millard Dooley

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Dooley Farms Partnership (33% interest)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

John T. Doolittle
(Full Name)

2410 Rayburn HOB
Washington DC 20515
(Mailing Address)

Daytime Telephone: 202-225-2511

Filer Status	[X] Member of the U.S. House of Representatives	State: District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John T. Doolittle	5/19/2004

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Name	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Sierra Dominion Financial Services, Inc.	spouse income	NA

For payments to charity in lieu of honoraria, use Schedule II

Name

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C						Block D												Block E
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP	Mega Corp Stock					X								X										X								P
		Simon & Schuster		Indefinite																	Royalties									X			
		1st Bank of Paducah, KY accounts						X									X									X							
	CA Legislative Retirement System					X									NA							NA											
	Schwab Cashfund				X																												
	Time Warner stock (was AOL)					X																											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

Page 4 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Research in Motion stock			X																												
	Applied Materials			X																												
	Cisco			X																												
	Intel			X										X								X										
	Inter-Tel			X										X								X										
	Krispy Kreme			X																												
	Microsoft			X										X								X										
	Novamed			X																												
	Kohls			X																												
	Pepsi			X										X								X										

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Name	Page 5 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	First USA Bank	VISA account		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Consumer Electronics Assn.	Jan 9-12	DC- Las Vegas - DC	Y	Y	Y	N
Public Governance Institute	Feb 28-Mar 2	DC- Greenbrier - DC	Y	Y	Y	N
Congressional Institute	Jan 29-31	DC- St Michaels, MD - DC	Y	Y	N	N
Assn of Trial Lawyers	July 18-20	DC- San Francisco - DC	Y	Y	Y	N
Natl Right to Work Assn	Oct 25-26	Syracuse - Raleigh, NC - DC	Y	Y	Y	N
Public Governance Institute	Dec 5-7	DC- Palm Springs - DC	Y	Y	Y	N

Name	Page 7 of 7

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
partnership	J-T Investments

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Michael F. Doyle, Jr.
(Full Name)

2227 Hampton Street
(Mailing Address)

412-242-4898
Daytime Telephone

Pittsburgh, PA 15218

Filer Status	[XX] Member of the U.S. House of Representatives — State: PA District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [XX]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [XX]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [XX]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [XX]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		05/12/2004

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Name	Page
Michael F. Doyle, Jr.	2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	~~Eastgate Insurance Agency, Inc.~~	~~Renewal Commissions~~	~~$10,235.44~~

For payments to charity in lieu of honoraria, use Schedule II.

Name	Michael F. Doyle, Jr.	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500
	None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Michael F. Doyle, Jr.

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B											Block C						Block D											Block E
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X							P
	SP Simon & Schuster			Indefinite																Royalties									X		
	SP 1st Bank of Paducah, KY accounts						X									X										X					
	J&M Assoc. (50% owner of the following holding)																			Partnership Income											
	7223 Church St., PGH, PA				X																X										
	Monongahela Co. (25% owner of the following holding)																			Partnership Income											
	1916 Monongahela Ave., PGH, PA				X																X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael F. Doyle, Jr.

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B [illegible]	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L Over [illegible]	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Eastgate Insurance Agency 45% Owner					X														X											
	S.E.R.S.-Commonwealth of Pennsylvania						X													X											

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SCHEDULE IV — TRANSACTIONS

Name Michael F. Doyle, Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		x								
	7643 Highland Ave., PGH, PA		X		09/27/03		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	S&T Bank, PGH, PA	Mortgage on property held by J&M Assoc. 50%					
	PNC Corp, PGH, PA	Mortgate on property held by Monongahela Co.					
	Sallie Mae	Parent Plus College Loan	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	International Foundation	Nov 13-17	PGH/Aruba/PGH	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Secretary/Treasurer	Eastgate Insurance Agency, Inc.
Partner	J&M Associates
Partner	Monongahela Company

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(11)

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 5:55 MC
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

David T. Dreier
(Full Name)

Room 237, Cannon House Office Building
(Mailing Address)

Washington, DC 20505

Daytime Telephone: (202) 225-2305

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 26th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David T. Dreier	May 15, 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	None	None	None

For payments to charity in lieu of honoraria, use Schedule II.

Name David Dreier | Page 3 of 11

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
Dreier Family Foundation	Appearance Real Time w/Bill Maher	8/8/2003	$800.00
Dreier Family Foundation(to be paid in 2004)	Appearance Buchanan & Press	8/20,21,22/2003	$3,000.00

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A			Block B: None (A)	$1 - $1,000 (B)	$1,001 - $15,000 (C)	$15,001 - $50,000 (D)	$50,001 - $100,000 (E)	$100,001 - $250,000 (F)	$250,001 - $500,000 (G)	$500,001 - $1,000,000 (H)	$1,000,001 - $5,000,000 (I)	$5,000,001 - $25,000,000 (J)	$25,000,001 - $50,000,000 (K)	Over $50,000,000 (L)	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	Block D: None (I)	$1 - $200 (II)	$201 - $1,000 (III)	$1,001 - $2,500 (IV)	$2,501 - $5,000 (V)	$5,001 - $15,000 (VI)	$15,001 - $50,000 (VII)	$50,001 - $100,000 (VIII)	$100,001 - $1,000,000 (IX)	$1,000,001 - $5,000,000 (X)	Over $5,000,000 (XI)	Block E: P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X																		P
			Simon & Schuster	Indefinite																	Royalties								X				
			1st Bank of Paducah, KY accounts					X									X																
	Altria Group (Philip Morris)						X								X											X							
	Boeing Company					X									X									X									
	Caterpillar, Inc.					X									X									X									
	Gaylord Ent.								X						X							X											
	Hewlett Packard Co.				X										X									X									
	Int'l Business Mach							X							X									X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Dreier

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	LM Ericsson Telefon		x					x				x						
	McMorgan Exploration							x				x						
	Motorola, Inc.		x					x										
	Network Assoc. Inc.							x				x						
	Pfizer, Inc.							x				x						P
	Surewest Communications			x				x										
	Time Warner, Inc.		x					x				x						
	Transocean, Inc.		x					x				x						
	Viacom, Inc.					x		x										
	Nicholas Applegate							x					x					P
	Phosphate Resources		x					x				x						
	Pimco Ca. Mutual							x										
	UBS Basket Common Stock			x				x										P
	RMA Money Mkt Portfolio		x															
	Bakerfield Ca CTFS											x						
	Amer Funds Wash Mut			x														
	FT Mutual Shares												x					
	John Hancock Regional							x										
	John Hancock Financial			x				x				x						
	Seligman Communications							x				x						
	Amer Pwr Converstion	x						x					x					S
	Wachovia Group	x						x					x					S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Dreier

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Seligman Henderson	X						X				X						S
	Cong Fed CU CheckAcct								X									
	Property 5 R.M., Ca				X									X				
	Tiffany Manor KC, Mo								X							X		
	Franklin Mut. Fund							X					X					
	Mass Mut. Life			X					X									
	Novell		X					X				X						
	Franklin Sm Gwth Fund		X					X				X						
	OK Publishing Co-Stock							X							X			

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SCHEDULE IV — TRANSACTIONS

Name David Dreier

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	x			10–12–03		x								
	Nicholas Applegate	x			3/26/03		x								
	Seligman Henderson		x		10/16/03		x								
	Wachovia Corp.		x		11/21/03		x								
	American Power Conversion Corp		x		11/21/03		x								
	Pfizer, Inc.	x			12/10/03		x								
	UBS AG EAS Basket of Common Stock	x			12/12/03			x							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	None	None					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None	None	None

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	U.S. Russia Business Council	2/20/03 2/21/03	Wash, D.C. San Fran-Washington, D.C.	N	Y	N	N
	Tech Net	2/21/03 2/21/03	San Francisco	Y	Y	N	N
	Public Governance Inst.	2/28/03 3/2/03	Washington, D.C.-Greenbier-Washington	Y	Y	N	N
	Bohemian Grove	7/18/03 7/20/03	Washington, D.C.- San Francisco- Washington	Y	Y	N	N
	The Annenberg Foundation	12/5/03 12/8/03	Los Angeles -Rancho Mirage-Los Angeles	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Secretary	The Dreier Family Foundation
Board of Trustees	Claremont McKenna College
Board Member	International Republican Institute
Co-Chairman of the Board	Los Angeles Committee for the Homeless (Los Angeles Mission)
Board Member	Claremont Graduate University Board of Fellows
Member	Advisory Council, Center for Strategic & International Studies

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
None	None	None

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member	Council on Foreign Relations
Trustee	H. Edward Dreier, Jr. Trust

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
None	None	None

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 2:32
(9)
MC
(Office Use Only)

John J. Duncan, Jr.
(Full Name)

12103 Butternut Circle
Knoxville, TN 37922
(Mailing Address)

202-225-5435
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: TN District: 02	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John J. Duncan, Jr.	5/14/02

Name	John J. Duncan, Jr.	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Tennessee-Board of Probation and Parole	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name	John J. Duncan, Jr.	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NONE			

This page may be copied if more space is required.

Name: John J. Duncan, Jr.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset (A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp. Stock		E	DIVIDENDS	VI	P
	Simon & Schuster		Indefinite	Royalties	IX	
	1st Bank of Paducah, KY accounts		F	INTEREST	VI	
	SalomonSmithBarney-IRA Cap. Preser. Fund US Sec		D	DIVIDENDS	II	
	SalomonSmithBarney-IRA Fidelity Value Fund		C	DIVIDENDS	II	
	SalomonSmithBarney-IRA Fidelity Fund Inc.		C	DIVIDENDS	II	
	SalomonSmithBarney-IRA BB&T Stock		F	DIVIDENDS	V	
DC	Cracker Barrel -Stock		C	DIVIDENDS	II	S-Part
DC	Cracker Barrel-Stock		C	DIVIDENDS	II	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: John J. Duncan, Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	[illegible]	C $1,001 - $15,000	[illegible]	E $50,001 - $100,000	[illegible]	G $250,001 - $500,000	[illegible]	I $1,000,001 - $5,000,000	[illegible]	K $25,000,001 - $50,000,000	[illegible]	BLOCK C Type of Income: DIVIDENDS	[illegible]	INTEREST	[illegible]	EXCEPTED TRUST	[illegible]	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	[illegible]	III $201 - $1,000	[illegible]	V $2,501 - $5,000	VI [illegible]	VII $15,001 - $50,000	[illegible]	IX $100,001 - $1,000,000	[illegible]	XI Over $5,000,000	BLOCK E Transaction P, S, E
	First Cent./United C.Bk-S	K		X										X											X							
	State of TN-Pension			X												X																
DC	McDonald's Corp.-Stock			X										X																		
	Salomon Smith B-Money Mk					X										X							X									
	Congressional CU-Checking			X																	X											
	BB&T - Stock							X						X											X							
DC	Cape Cod B&T-Stock			X										X																		
	Cape Cod B&T-Stock			X										X																		
DC	Gillette-Stock			X										X																		
DC	MCI World Com-Stock	X												X							X											
DC	Krispy Kreme-Stock													X							X											
DC	Lowe's - Stock			X										X									X									
	Summit Amer-Stock													X							X											
	Gap, Inc. - Stock			X										X																		
	Home Depot- Stock			X										X							X											
	Info Space - Stock													X							X											
	Citigroup Cap. VIII-Stock					X								X									X									
	General Motors Corp.-Stock					X								X											X							
	Exxon- Stock					X								X																		
	Southern Company-Stock					X								X									X									
DC	Norfolk-Southern-Stock			X										X									X									

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SCHEDULE IV — TRANSACTIONS

Name: John J. Duncan, Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	B $15,001–$50,000	C $50,001–$100,000	D $100,001–$250,000	E $250,001–$500,000	F $500,001–$1,000,000	G $1,000,001–$5,000,000	H $5,000,001–$25,000,000	I $25,000,001–$50,000,000	J Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
DC	Cracker Barrel - Stock		X		11-17-03	X									

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1234

Name	Page 1 of 1
John J. Duncan, Jr.	

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	AAAE Aviation Issues Conference	Jan.10-12	Wash.- Kohala-Wash.,D.C.	Y	Y	N	N
	Assoc. of American Railroads	Apr.27-27	Knoxville-Monterey-Knoxville	Y	Y	Y	Y

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Name	John J. Duncan, Jr.	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

16

HAND DELIVERED

2004 MAY 17 AM 11:02

(Office Use Only)

MC

Jennifer B. Dunn
(Full Name)

1501 Longworth H.O.B.
(Mailing Address)

Daytime Telephone:

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: WA District: 08	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jennifer Dunn	5/14/04

1238

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
US Customs and Border Protection	Spouse Salary	NA
Fluor Hanford Corp.	Spouse: Management Services	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
N/A			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	*Examples:* Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties										X		
	1st Bank of Paducah, KY accounts						X									X										X						
	American Enterprise Investment Services Inc						X							X		X							X									
	AXP High Yield Tax-Exempt Fd	X												X									X									E
	AXP Tax-Free Money Fund Inc	X												X								X										E
	AXP Intermediate Tax Exempt Fd	X												X									X									E
	AXP Cash Management Fund				X									X								X										
	AXP New Dimensions Fund B+A IRA			X										X								X										P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jennifer B. Dunn

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $201 – $1,000	IV $2,501 – $5,000	VI $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	AXP LDS Life Ins. Co. TAX Elizible Annuity			X					X				X					
	Key Bank National Assoc.		X						X				X					
	Dunn, Reagan - Note			X					X					X				
	CFCU - Savings Acct.	X						X					X					
	CFCU - Checking Acct.	X										X						
	Bryant R Dunn Sub Trust B			Note: Reagan						X				X				
	Condo: Desert Island																	
	Rancho Mirage, CA " des				X			X							X			
	One High-Yield Savings								X				X					E
SP	See pages 6 - 8																	

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Jennifer B. Dunn

Reporting Individual's Name: Edward K. THOMSON

SCHEDULE A

Assets and Income — BLOCK A

For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market value exceeding $1,000 at the close of the reporting period, or which generated more than $200 in income during the reporting period, together with such income.

For yourself, also report the source and actual amount of earned income exceeding $200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than $1,000 (except report the actual account of any honoraria over $200 of your spouse).

None ☐

Valuation of Assets at close of reporting period — BLOCK B

Income: type and amount. If "None (or less than $201)" is checked, no other entry is needed in Block C for that item. — BLOCK C

	Assets and Income	None (or less than $1,001)	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	Over $1,000,000 *	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type: Dividends	Type: Rent and Royalties	Type: Interest	Type: Capital Gains	Amount: None (or less than $201)	$201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	Over $5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
Examples	Central Airlines Common				x												x						x										
	Doe Jones & Smith, Hometown, State																															Law Partnership Income $130,000	
	Kempstone Equity Fund					x																		x									
	IRA Heartland 500 Index Fund							x						x	x										x								
1	Schwab S+ TWEIX Am Century Fund			x													x					x											
	Schwab S+ DODGX Dodge & Cox Fund			x													x					x											
	Schwab S+ SLASX Selected Am Fund			x													x					x											
2	TBG Finac'l - DefComp Am Funds Bal					x											x							x									
	TBG Finac'l - DefComp Janus Balanced					x											x							x									
	TBG Finac'l - DefComp Am Funds Growth					x											x							x									
3	TBG Finac'l - DefComp. Hartford Capital ap					x											x						x										
	CityNational IRA notes					x													x						x								
	Bank of America Invest ASVIX Am Cent		x														x				x												
4	Bank of Americ Invest. TWEIX Am Cent		x														x				x												
	Bank of America Invest DODGX Dodge& C		x														x				x												
	Bank of America Invest SLASX Sel Am Fu		x														x				x												
5	Hewitt (Fluor 401(k)) Short-term Bond		x																x				x										
	Hewitt (Fluor 401(k))Inter-term Bond			x															x				x										
	Hewitt (Fluor 401(k))Balanced Fund					x											x		x					x									
6	Hewitt (Fluor 401(k)) Large cap Equity			x													x						x										
	Hewitt (Fluor 401(k)) Small cap Equity			x													x						x										
	Hewitt (Fluor 401(k)) Fluor Corp common			x													x						x										

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

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Jennifer B. Dunn

Reporting Individual's Name: Edward K THOMSON

SCHEDULE A continued

(Use only if needed)

Assets and Income — BLOCK A

Valuation of Assets at close of reporting period — BLOCK B

Income: type and amount. If "None (or less than $201)" is checked, no other entry is needed in Block C for that item. — BLOCK C

None ☐

#	Assets and Income (BLOCK A)	None (or less than $1,001)	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	Over $1,000,000 *	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type: Dividends	Type: Rent and Royalties	Type: Interest	Type: Capital Gains	Amount: None (or less than $201)	$201 - $2,500	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	Over $5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	Schwab IRA - Applied Materials		X													X				X												
	Schwab IRA - American Century Small Cap		X													X				X												
	Schwab IRA - Action Performance		X													X				X												
2	Schwab IRA - Berkshire Hathaway 'B'			X												X						X										
	Schwab IRA - Citigroup Inc.			X												X						X										
	Schwab IRA - Cephalon Inc		X													X				X												
3	Schwab IRA - Cisco Systems			X												X						X										
	Schwab IRA - Disney Co			X												X						X										
	Schwab IRA - Enron	X																		X												
4	Schwab IRA - General Electric		X													X						X										
	Schwab IRA - Harbor International		X													X						X										
	Schwab IRA - Interactive Corp			X												X						X										
5	Schwab IRA - Intel Corp		X													X						X										
	Schwab IRA - Isis Pharmaceuticals		X													X						X										
	Schwab IRA - Johnson & Johnson				X											X						X										
6	Schwab IRA - Coca Cola Co		X													X						X										
	Schwab IRA - Microsoft Corp		X													X				X												
	Schwab IRA - Nokia Corp ADS			X												X				X												
7	Schwab IRA - Qualcomm Inc.			X												X				X												
	Schwab IRA - Royce Low-priced stock Fun			X												X				X												
	Schwab IRA - Scudder Greater Europe			X												X						X										
8	Schwab IRA - Schwab Corp		X													X						X										
	Schwab IRA - Scientific Atlanta			X												X						X										
	Schwab IRA - S&P Depository Receipts			X												X				X												
9	Schwab IRA - Strong High Yield			X												X						X										
	Schwab IRA - Teco Energy		X													X				X												
	Schwab IRA - Time Warner			X												X				X												

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

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Jennifer B. Dunn

Reporting Individual's Name: Edward K THOMSON

SCHEDULE A continued

(Use only if needed)

Assets and Income — BLOCK A

Valuation of Assets at close of reporting period — BLOCK B

Income: type and amount. If "None (or less than $201)" is checked, no other entry is needed in Block C for that item. — BLOCK C

None ☐

#	Assets and Income (Block A)	None (or less than $1,001)	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type: Dividends	Type: Rent and Royalties	Type: Interest	Type: Capital Gains	Amount: None (or less than $201)	Amount: $201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	Over $5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	Schwab IRA - Vaxgen		X														X				X												
	Schwab IRA - STHYX			X													X				X												
	Schwab IRA - ASVIX		X														X				X												
2	Schwab IRA - HAINX		X														X				X												
	Schwab IRA - JSCVX			X													X				X												
	Schwab IRA - RYLPX			X													X				X												
3	Schwab IRA - SCGEX			X													X				X												
	Schwab IRA - SPY			X													X				X												
	Schwab IRA - cash			X															X			X											
4	Sterling Marine - 100% ownership of Grand Banks 42' trawler				X													X							X								
5	Fluor Corp.severence payment 02/03	X																			X											Severence payment $106,000	
6	TBG Financial (Fluor Corp. Pension)			X													X		X				X									Pension $38,000 total after age 67	
7	Options on 4000 shares of Fluor Corp stoc	X																			X												
8																																	
9																																	

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categ

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SCHEDULE IV — TRANSACTIONS

Name Jennifer B. Dunn

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	AXP Tax-Free Money Fund, Inc			X	7-07-03		X								
	AXP Intermediate Tax-Exempt Fund			X	7-07-03		X								
	AXP New Dimensions Fund- IRA	X	IRA Contribution		7-07-03	X									
	AXP High Yield Tax-Exempt Fund			X	7-07-03		X								
	One High Yield Savings			X	12/2003		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	GMAC Mortgage dba Diech.com 3200 Park Center Drive #150 Costa Mesa, CA 92626	Condo: 50% Interest Desert Island Rancho Mirage, CA #305	X				
SP	Bank of America, Richland WA	Line of Credit	X				
SP	Hewitt (Fluor 401k) Aliso Viejo, CA	General Purpose Loan	X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	World Economic Forum	Jan. 22-27	Dulles - Zurich → Dulles	Y	Y	N	N
	Ripon Society TransAtlantic Conf.	Aug. 10-15	Dallas - Newark - London - Seattle	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner (50% Interest)	Dunn-Mijich (a joint venture partnership to own/manage rental condo at Rancho Mirage, CA - See Schedule 3)
Board Member	National Junior Statesman Foundation
Board Member	Presidential Commission on Debates
Member, Capital Campaign Board	Eastside Domestic Violence Center for Women
Board Member	Lexington Institute
Board Member	National Campaign Against Youth Violence

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 2004 01-010 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board	Ronald Reagan Legacy Project
Board Member	Congressional Coalition for Adoption Institute
Member	International Women's Forum
Honorary Board Member	Asian Performing Arts Theater
Board Member	Hazel Goddess Fund
Member, Cong. Advisory Cmte.	International Republican Institute
Co-Chair	International Dialogue - Congressional Members Working Group on the Americas

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

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Use additional sheets if more space is required.

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Do not Complete Schedule B if you are a new entrant, nominee, Vice Presidential or Presidential Candidate

Reporting Individual's Name: Edward K. Thomson

SCHEDULE B

Part I: Transactions

None ☐

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" box to indicate sales made pursuant to a certificate of divestiture from OGE.

	Identification of Assets	Transaction Type (x): Purchase	Sale	Exchange	Date (Mo., Day, Yr.)	Amount of Transaction (x): $1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Certificate of divestiture
Example	Central Airlines Common	x			2/1/99			x									
1	Fluor Corp. common		X		12/1/2003				X								
2																	
3																	
4																	
5																	

* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than $260; and (2) travel-related cash reimbursements received from one source totaling more than $260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. **Exclude** anything given to you by the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth $104 or less. See instructions for other exclusions.

None ☒

	Source (Name and Address)	Brief Description	Value
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	$300
1			
2			
3			
4			
5			

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Reporting Individual's Name: Edward K THOMSON

SCHEDULE C

Part I: Liabilities

Report liabilities over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None ☐

	Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x): $10,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	Over $1,000,000*	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000
Examples:	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.			x								
	John Jones, 123 J St., Washington, DC	Promissory note	1999	10 ¾	on demand					x						
1	Bank of America, Richland WA	Line of Credit	2003	5%	one year		X									
2	Hewitt (Fluor 401(k)) 1 Fluor Daniel Drive Aliso Viejo CA	General Purpose loan	2003	5%	five years		X									
3																
4																
5																

* This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: continuing participation in an employee benefit plan (e.g. 401k, deferred compensation; (2) continuation payment by a former employer (including severance payments); (3) leaves of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits

None ☐

	Status and Terms of any Agreement or Arrangement	Parties	Date
Example:	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Doe Jones & Smith, Hometown, State	7/85
1	Continuing participation in Fluor Corp 401(k) Managed by Hewitt	Hewitt for Fluor Corp. Aliso Viejo CA E K Thomson	2/03
2	Continuing participation in Fluor Deferred Compensation Fund. Managed by TBG Financial	TGB for Fluor Corp. Aliso Viejo CA E K Thomson	2/03
3	Continuing participation in Fluor Corp. pension. Managed by Hewitt. $38,000. Expected to start after age 67 Defined benefit	Hewitt for Fluor Corp. Aliso Viejo CA E K Thomson	2/03
4	Received on 02/03 severence payment of $108,000 from Fluor Corp. No continuing participation.	Fluor Corp. E K Thomson	2/03
5			
6			

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Reporting Individual's Name		Page Number
Edward Keith THOMSON	**SCHEDULE D**	1 of 1

Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. **Exclude** positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None ☐

	Organization (*Name and Address*)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	Fluor Corp. One Fluor Daniel Drive, Aliso Viejo CA 98968	Engineering & Construction corporation	Corporate Vice President and President & CEO Fluor Hanford	7/91 4/01	2/03 2/03
2	Sterling Consulting LLC 1809 S. Yost Place Kennewick WA 99338	Consultants in management strategy	Chief Executive Officer	2/03	10/03
3	Sterling Marine 1809 S. Yost Place Kennewick WA 99338	Marine charter	Principal	2/03	10/03
4	The Sterling Group 1809 S. Yost Place Kennewick WA 99338	Diversified holding company	Principal	2/03	10/03
5					
6					

Part II: Compensation In Excess Of $5,000 Paid by One Source

Report sources of more than $5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than $5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate

None ☐

	Source (*Name and Address*)	Brief Description of Duties
Examples:	Doe Jones & Smith, Hometown, State	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	Fluor Hanford Corp, Richland WA 99252	Management services
2		
3		
4		
5		
6		

Prior Editions Cannot Be Used.

JENNIFER DUNN
8TH DISTRICT, WASHINGTON

COMMITTEE ON WAYS AND MEANS
HEALTH
TRADE

SELECT COMMITTEE ON
HOMELAND SECURITY, VICE CHAIR

JOINT ECONOMIC COMMITTEE

UNITED STATES
HOUSE OF REPRESENTATIVES

WASHINGTON OFFICE:
1501 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, D.C. 20515
(202) 225-7761
http://www.house.gov/dunn

DISTRICT OFFICE
2737 78TH AVENUE, SE
SUITE 202
MERCER ISLAND, WA 98040
(206) 275-3438
(800) 955-3866

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 3:01
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC

May 17, 2004

Dear to whom it may concern:

I would like to amend my financial disclosure form for calendar year 2003. In schedule III, under Assets and "Unearned" Income, page 5 of 13 in the column for Condo: Desert Island Rancho Mirage, CA #305, instead of being marked at the value of $100,001 - $250,000 it should be $250,001 - $500,000. If you have any questions please feel free to contact my Executive Assistant, Nichole Robison at 202/225-7761. Thank you for your help in this matter.

Sincerely,

Jennifer Dunn

Jennifer Dunn
Member of Congress

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3

2004 MAY 20 PM 2:23

HC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

Thomas Chester Edwards
(Full Name)

2459 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-6105
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: TX District: 11	☐ Officer Or Employee	Employing Office.
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions—	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Chet Edwards	May 18, 2004

1255

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Chester Edwards

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Wright Patman Dederal Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Central National Bank Freedom Account	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	Central National Bank	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Vanguard 500 Index Fund	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Vanguard Roth IRA	$1,001 - $15,000	INTEREST/DIVIDENDS	$1 - $200	
	Employees Retirement System	$1,001 - $15,000	N/A	N/A	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Chester Edwards

SP	Vanguard Roth IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Vanguard IRA	$15,001 - $50,000	DIVIDENDS	$1 - $200	
SP	Union Planters	$1 - $1,000	DIVIDENDS	$1 - $200	
DC	Vanguard 500 Index Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	
DC	Vanguard 500 Index Fund	$1,001 - $15,000	DIVIDENDS	$1 - $200	

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 4:04

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

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MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Vernon J. Ehlers
(Full Name)

1848 Morningside Drive SE Grand Rapids, MI 49506
(Mailing Address)

202-225-3831
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: MI District: 3	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Vernon J. Ehlers	5/17/04

1258

SCHEDULE I - EARNED INCOME

Name Vernon J. Ehlers

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Michigan	Pension	$31,794
Kent County, Michigan	Pension	$1,930

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Vernon J. Ehlers

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
LaGrave Avenue Christian Reformed Church	Speech	May 4, 2003	$100
University of Wisconsin	Speech	September 26, 2003	$500
Center for Public Justice	Speech	October 13, 2003	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Vernon J. Ehlers

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	Lake Michigan Credit Union IRA	$1,001 - $15,000	INTEREST	N/A	N/A
	State of Michigan 401(k)	$50,001 - $100,000	combination	NONE	N/A
	IRA Bear, Steams and Company	$250,001 - $500,000	combination	NONE	N/A
	Calvin College Retirement Account TIAA-CREF	$250,001 - $500,000	combination	NONE	N/A
	Lake Michigan Credit Union	$50,001 - $100,000	DIVIDENDS	$2,501 - $5,000	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Vernon J. Ehlers

	California Retirement System	$15,001 - $50,000	INTEREST	N/A	N/A
	Northern Trust Bank	$50,001 - $100,000	INTEREST	$1,001 - $2,500	N/A
	Bank One	$1,001 - $15,000	INTEREST	$1 - $200	N/A

SCHEDULE VI - GIFTS

Name Vernon J. Ehlers

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
American Association for Advancement of Science	Philip Hague Ableson Prize for promoting science and mathematics education. Approved by House Committee on Standards of Official Conduct 10-29-02	$5,000
American Association of Mechanical Engineers	Ralph Coats Roe Prize for contributions toward promoting engineering accomplishments. Approved by House Committee on Standards of Official Conduct 6-18-03	$10,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Vernon J. Ehlers

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Faith and Politics Institue	Jan 10-12	Grand Rapids, MI to Santa Barbara, CA -Return	Y	Y	N	N/A
Harvard University JFK School of Government	Jan.16-19	Grand Rapids, MI to Ft. Lauderdale, FL-Return	N	N	N	N/A
American Association of Railroads	Jan. 16-19	Ft. Lauderdale, FL.	Y	Y	N	N/A
American Association for Advancement of Science	Feb. 15-17	Grand Rapids, MI to Denver, CO.-Return	Y	Y	N	N/A
American Association of Railroads	April 24-27	Grand Rapids, MI to Pebble Beach, CA-Return	Y	Y	Y	N/A
Michigan Road Builders	Aug. 7-10	Grand Rapids, MI to Crystal Mt., MI-return	Y	Y	Y	N/A
University of Wisconsin	Sept. 25-26	Grand Rapids, MI to Madison, WI-Return	Y	Y	N	N/A

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Rahm I Emanuel
(Full Name)

4228 North Hermitage Avenue Chicago, IL 60613
(Mailing Address)

773-267-5926
Daytime Telephone:

2004 MAY 17 PM 5:20
(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representative	State: IL District: 5	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	Amendment ☐	Termination ☐ — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
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Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rahm	5/17/04

SCHEDULE I - EARNED INCOME

Name Rahm I Emanuel

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
House of Representatives	Salary	$138,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Advisory Large Cap Equity Fund, LP	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	T
	Advisory Research Small Mid Cap Value Equity Fund	$250,001 - $500,000	DIVIDENDS/CAPITAL GAINS	$15,001 - $50,000	T
	Alabama Agric Deb	None	INTEREST	$1,001 - $2,500	T
	American Home Products Note	None	INTEREST	$1,001 - $2,500	T
	American power Conversion-IRA	None	DIVIDENDS	$201 - $1,000	T
DC	AMLI	None	DIVIDENDS	$2,501 - $5,000	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	AMLI	None	DIVIDENDS	$1,001 - $2,500	T
	Andrew Corp	None		NONE	T
	Archer Daniels Midland	None		NONE	S
DC	Arrow Electronics Deb	None	INTEREST	$1,001 - $2,500	T
	Ashland Cty, Oh G/O	None	INTEREST	$2,501 - $5,000	T
	Bank America Notes	None	INTEREST	$201 - $1,000	PS
DC	Bankamerica Notes	None	INTEREST	$1,001 - $2,500	T
DC	Bear Stearns MMA	None	DIVIDENDS	$1 - $200	T
SP	Bear Stearns MMA	$1 - $1,000	DIVIDENDS	$1 - $200	
	Bear Stearns MMA-IRA	None	DIVIDENDS	$1 - $200	T
SP	Bear Stearns-IRA	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Benchmark Electronics	None		NONE	T
DC	Best Buy	None	DIVIDENDS	$201 - $1,000	S
DC	Boeing	None	DIVIDENDS	$201 - $1,000	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Brazos River, Tx Deb	None	INTEREST	$1,001 - $2,500		T
DC	Brazos River, Tx Deb	None	INTEREST	$1,001 - $2,500		T
DC	Brooke Cty W Va G/O	None	INTEREST	$1,001 - $2,500		T
DC	C & D Technologies	None	DIVIDENDS	$1 - $200		T
	Carramerica Realty	None	DIVIDENDS	$2,501 - $5,000		T
	Carroll Tex G/O	None	INTEREST	$201 - $1,000		T
	Carroll Tx G/O	None	INTEREST	$201 - $1,000		T
	Checkpoint Software	None		NONE		T
DC	Chevron Texaco	None	DIVIDENDS	$1,001 - $2,500		T
	Chilton New Era Partners, LP	$250,001 - $500,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$15,001 - $50,000		T
	CIT Group Notes	None	INTEREST	$1,001 - $2,500	P	T
DC	Citigroup	None	DIVIDENDS	$201 - $1,000		T
	Citigroup	None	DIVIDENDS	$1,001 - $2,500		T
DC	Citigroup Cap	None	DIVIDENDS	$201 - $1,000		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Clackamas & Wash Cty Oregon Deb	None	INTEREST	$1,001 - $2,500	P	T
	CNA Financial Note	None	INTEREST	$2,501 - $5,000		T
	Concord EFS-IRA	None		NONE		T
	Cook & Du Page County Deb	None	INTEREST	$201 - $1,000	P	T
	Cook Cnty Ill G/O Sch Dist 36	None		NONE	S	
DC	Cook Cty, Il G/O	None	INTEREST	$1,001 - $2,500		T
DC	Courtland Alabama Deb	None	INTEREST	$1,001 - $2,500	P	T
	CVS Corp	None	DIVIDENDS	$201 - $1,000		T
	Daimler Chrysler Notes	None	INTEREST	$2,501 - $5,000	P	T
	Dana Corp Note	None	INTEREST	$1,001 - $2,500	S	
DC	Darlington Cty Deb	None	INTEREST	$1,001 - $2,500		T
	Denver Co Deb	None	INTEREST	$2,501 - $5,000	P	T
	Dillards-Notes-IRA	None	INTEREST	$1,001 - $2,500		T
DC	DQE	None	DIVIDENDS	NONE		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Duke Capital Notes--IRA	None	INTEREST	$1,001 - $2,500		T
	Edcouch Elsa, Tx G/O	None	INTEREST	$2,501 - $5,000		T
DC	Emerson Electric	None	DIVIDENDS	$201 - $1,000		T
	Emerson Electric-IRA	None	DIVIDENDS	$201 - $1,000		T
	Federal Home Loan Bank Notes	None	INTEREST	$15,001 - $50,000		T
	Felcor Lodging	None	INTEREST	NONE		T
	First Union Capital Note	None	INTEREST	$1,001 - $2,500		T
	Fond Du Lac, Wo G/O	None	INTEREST	$201 - $1,000		T
DC	Fort Collins Co Deb	None	INTEREST	$1,001 - $2,500	P	T
	Freddie Mac	None		NONE	S	
	Galveston Tx Deb	None	INTEREST	$2,501 - $5,000	P	T
	GATX Cap Corp Note	None	INTEREST	$2,501 - $5,000		T
	GATX Notes-IRA	None	INTEREST	$2,501 - $5,000		T
DC	General Electric	None	DIVIDENDS	$1,001 - $2,500		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

SP	General Electric	$1,001 - $15,000	DIVIDENDS	$1 - $200		
DC	Genoa City, Wi G/O	None	INTEREST	$201 - $1,000		T
DC	Genoa City, Wi G/O	None	INTEREST	$1,001 - $2,500		T
	GMAC Deb	None	INTEREST	$1,001 - $2,500		T
DC	GMAC Prfrd	None	DIVIDENDS	$201 - $1,000		T
	Good Hope Limited Partnership	$15,001 - $50,000	RENT	$1,001 - $2,500		T
	Grand River Ok Deb	None	INTEREST	$1,001 - $2,500	P	T
	Grosse Pt Michigan Deb	None	INTEREST	$2,501 - $5,000	P	T
	GTE Corp Deb	None	INTEREST	$201 - $1,000		T
	GTE Corp Note	None	INTEREST	$1,001 - $2,500		T
DC	Guidant Corp	None	DIVIDENDS	$201 - $1,000		T
	Guidant Corp--IRA	None	DIVIDENDS	$1 - $200		T
	Hain Celestial Group	None		NONE		T
	Harris Assoc-Oakmark Int'l	None	DIVIDENDS	$1 - $200		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

DC	Harris Cty Tx Deb	None	INTEREST	$201 - $1,000	P	T
DC	Health Management	None	DIVIDENDS	$201 - $1,000		T
	Household Finance Corp Note	None	INTEREST	$1,001 - $2,500		T
DC	Household Finance Notes	None	INTEREST	$1,001 - $2,500		T
DC	Ill Sports Auth Deb	None	INTEREST	$1,001 - $2,500		T
	Ill Student Assist Deb	None	INTEREST	$1,001 - $2,500		T
	Illinois Housing Dev Deb	None	INTEREST	$1,001 - $2,500	P	T
	Indiana Bd Bank Deb	None	INTEREST	$1,001 - $2,500		T
DC	Intel	None	DIVIDENDS	$1 - $200		T
DC	ITT Deb	None	INTEREST	$1,001 - $2,500	P	T
	IVAX Corp Conv Deb	None	INTEREST	$1,001 - $2,500		T
	JP Morgan Note	None	INTEREST	$1,001 - $2,500		T
	Kiel, Wi G/O	None	INTEREST	$201 - $1,000		T
	King Cty Wash G/O	None	INTEREST	$2,501 - $5,000		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

SP	La Salle Bank	$1,001 - $15,000		NONE	P
	Lake Cnty, Il G/O	None	INTEREST	$2,501 - $5,000	T
JT	LaSalle Bank	$1,001 - $15,000	INTEREST	$1 - $200	
DC	Lebanon, Pa Deb	None	INTEREST	$1,001 - $2,500	T
	Lehman Bros Cap Tr	None	DIVIDENDS	$2,501 - $5,000	T
	Lehman Bros Notes-IRA	None	INTEREST	$201 - $1,000	T
	Lisle Ill Deb	None	INTEREST	$1,001 - $2,500	P T
	Loan Receivable--Friends of Rahm Emanuel for Congress	$250,001 - $500,000		NONE	
	Lyon Cnty, Nv G/O	None	INTEREST	$2,501 - $5,000	T
	Madison Cty, Il G/O	None	INTEREST	$201 - $1,000	T
DC	Maricopa Cty, Az Deb	None	INTEREST	$201 - $1,000	S
	Mason Dixon Cap Tr	None	DIVIDENDS	$1,001 - $2,500	T
	McHenry Cty, Ill G/O	None	INTEREST	$201 - $1,000	T
DC	McHenry Cty, Ill Sch Dist Deb	None	INTEREST	$201 - $1,000	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Memphis-Shelby Cnty, Tn Deb	None	INTEREST	$1,001 - $2,500	T
	Merck	None	DIVIDENDS	$201 - $1,000	T
DC	Merrill Lynch Prfrd Cap Tr	None	DIVIDENDS	$201 - $1,000	T
	Metropolitan Wash DC Deb	None	INTEREST	$2,501 - $5,000	T
DC	Michigan Muni Bond	None	INTEREST	$1,001 - $2,500	T
	Michigan St Strategic Deb	None	INTEREST	$1,001 - $2,500	P T
SP	Molex-IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
DC	Monmouth, Ill G/O	None	INTEREST	$1,001 - $2,500	T
DC	Monsanto	None	DIVIDENDS	$1 - $200	T
	Monsanto-IRA	None	DIVIDENDS	$1 - $200	T
	Motorola	None	DIVIDENDS	$201 - $1,000	T
DC	Motorola Notes	None	INTEREST	$1,001 - $2,500	T
	Mylan Labs	None	DIVIDENDS	$1 - $200	T
	Mylan Labs	None	DIVIDENDS	$1 - $200	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Mylan Labs-IRA	None	DIVIDENDS	$1 - $200		T
	New York, NY G/O	None	INTEREST	$201 - $1,000		T
	Newscorp Overseas Prfrd	None	DIVIDENDS	$5,001 - $15,000		T
	Northeast Neb Deb	None	INTEREST	$2,501 - $5,000	P	T
	Oklahoma St Cap Deb	None	INTEREST	$2,501 - $5,000	P	T
DC	Oregon, Wi Sch Dist Deb	None	INTEREST	$1,001 - $2,500		T
	Panhandle Plains, Tx Deb	None	INTEREST	$1,001 - $2,500		T
DC	Pembroke Pines, Fl Deb	None	INTEREST	$1,001 - $2,500		T
DC	Pfizer	None		NONE	E	T
	Pfizer-IRA	None		NONE	E	T
	Pfizer-IRA	None	DIVIDENDS	$201 - $1,000		T
DC	Pharmacia	None		NONE	E	
	Pharmacia-IRA	None		NONE	E	
	Philadelphia, Pa G/O	None	INTEREST	$1,001 - $2,500		T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

	Philadelphia, Pa G/O	None	INTEREST	$2,501 - $5,000	T
DC	Pilchuck Dev Wash Deb	None	INTEREST	$2,501 - $5,000	T
SP	Public Storage	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
DC	Qualified Blind Trust	$500,001 - $1,000,000	DIVIDENDS/RENT/CAPITAL GAINS	$15,001 - $50,000	
	Qualified Blind Trust	$5,000,001 - $25,000,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$100,001 - $1,000,000	
DC	Qualified Blind Trust	$500,001 - $1,000,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$15,001 - $50,000	
DC	Qualified Blind Trust	$500,001 - $1,000,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$15,001 - $50,000	
	Qualified Blind Trust--IRA	$250,001 - $500,000	DIVIDENDS/INTEREST/CAPITAL GAINS	$15,001 - $50,000	
	S&P 500 Index Equally Weighted Fund, LP	$250,001 - $500,000	DIVIDENDS/CAPITAL GAINS	$15,001 - $50,000	T
	Sabine River, Tx Deb	None	INTEREST	$2,501 - $5,000	T
	Sabine River, Tx Deb	None	INTEREST	$1,001 - $2,500	T
DC	Schlumberger	None	DIVIDENDS	$201 - $1,000	T
	Smith Barney MMA	None	DIVIDENDS	$201 - $1,000	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

DC	Socorro, N. Mex Deb	None	INTEREST	$1,001 - $2,500	S
DC	St Paul Cap Tr	None	DIVIDENDS	$1,001 - $2,500	T
	Sun Co Deb--IRA	None	INTEREST	$1,001 - $2,500	T
DC	Sun Microsystems Notes	None	INTEREST	$201 - $1,000	T
	TDS Capital II-IRA	None	DIVIDENDS	$1,001 - $2,500	T
	Tellabs	None		NONE	T
	Textron Cap I	None	DIVIDENDS	$5,001 - $15,000	T
	Tomball, Tx G/O	None	INTEREST	$2,501 - $5,000	T
	Toys R Us Note	None	INTEREST	$1,001 - $2,500	T
	Travelers Property	None	DIVIDENDS	$1 - $200	T
DC	Tx Muni Pwr Deb	None	INTEREST	$1,001 - $2,500	T
	U S Treasury Note--IRA	None	INTEREST	$1,001 - $2,500	T
	UBS Prfrd Tr	None	DIVIDENDS	$1,001 - $2,500	T
	Union Carbide Note	None	INTEREST	$2,501 - $5,000	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

DC	Union Carbide Notes	None	INTEREST	$1,001 - $2,500		T
	University of Ill Deb	None	INTEREST	$1,001 - $2,500		T
	University of Tx Deb	None	INTEREST	$1,001 - $2,500		T
	UPS	None	DIVIDENDS	$201 - $1,000		T
DC	UPS	None	DIVIDENDS	$201 - $1,000		T
	UPS-IRA	None	DIVIDENDS	$201 - $1,000		T
	US Treasury Note	None	INTEREST	$15,001 - $50,000	S	
	US Treasury Notes	None	INTEREST	$15,001 - $50,000	S	
	Vision Optical Partners, LLC	None	INTEREST	$1 - $200	S	
	Washoe Cty Nev Deb	None	INTEREST	$1,001 - $2,500	P	T
	West Hartford, Conn G/O	None	INTEREST	$1,001 - $2,500	S	
DC	West Penn Pwr Co	None	INTEREST	$1,001 - $2,500		T
DC	Will & Kankakee Ctys, Il G/O	None	INTEREST	$201 - $1,000		T
DC	Willis Tx Deb	None	INTEREST	$1,001 - $2,500	P	T

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rahm I Emanuel

DC	Wood River City, Il G/O	None	INTEREST	$1,001 - $2,500	T
	Worldcom	None		NONE	T
	WR Berkely Deb	None	INTEREST	$5,001 - $15,000	T

SCHEDULE IV - TRANSACTIONS

Name Rahm I Emanuel

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	U. S. Treasury Note	S	02/28/03	$250,001 - $500,000
	U. S. Treasury Notes	S	02/18/03	$500,001 - $1,000,000
	West Hartford Conn G/O	S	04/23/03	$100,001 - $250,000
	Dana Corp Note	S	05/14/03	$50,001 - $100,000
	Bank America Notes	PS	3/17/03 05/14/03	$100,001 - $250,000
	Cook County, Ill G/O School Dist 36	S	03/04/03	$15,001 - $50,000
	Archer Daniels Midland	S	01/27/03	$1,001 - $15,000
	Freddie Mac	S	02/21/03	$100,001 - $250,000
DC	Maricpoa Cty, Az Deb	S	4/8/03	$15,001 - $50,000
DC	Socorro, N. Mex Deb	S	5/1/03	$1,001 - $15,000
	Vision Optical Partners, LLC	S	12/31/03	$1,001 - $15,000
DC	Best Buy	S	3/25/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Rahm I Emanuel

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	CIT Group Notes	P	3/25/03	$50,001 - $100,000
	Clackamas & Wash Cty Oregon Deb	P	3/26/03	$50,001 - $100,000
	Cook & Du Page County Deb	P	2/21/03	$50,001 - $100,000
DC	Courtland Alabama Deb	P	2/4/03	$15,001 - $50,000
	Daimler Chrysler Notes	P	3/28/03	$50,001 - $100,000
	Denver Co Deb	P	2/19/03	$50,001 - $100,000
DC	Fort Collins Co Deb	P	4/15/03	$15,001 - $50,000
	Galveston Tx Deb	P	2/19/03	$50,001 - $100,000
	Grand River Ok Deb	P	2/26/03	$50,001 - $100,000
	Grosse Pt Michigan Deb	P	4/1/03	$100,001 - $250,000
DC	Harris Cty Tx Deb	P	1/30/03	$15,001 - $50,000
	Illinois Housing Dev Deb	P	2/28/03	$50,001 - $100,000

SCHEDULE IV - TRANSACTIONS

Name Rahm I Emanuel

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
DC	ITT Deb	P	1/31/03	$15,001 - $50,000
	Lisle Ill Deb	P	3/4/03	$100,001 - $250,000
	Michigan St Strategic Deb	P	3/20/03	$50,001 - $100,000
	Northeast Neb Deb	P	2/26/03	$100,001 - $250,000
	Oklahoma St Cap Deb	P	2/21/03	$100,001 - $250,000
	Washoe Cty Nev Deb	P	2/27/03	$50,001 - $100,000
DC	Willis Tx Deb	P	4/23/03	$15,001 - $50,000
DC	Pfizer	E	4/1/03	$1,001 - $15,000
	Pfizer-IRA	E	4/1/03	$15,001 - $50,000
SP	La Salle Bank	P	1/1/03	$1,001 - $15,000
DC	Pharmacia	E	4/1/03	$1,001 - $15,000
	Pharmacia	E	4/1/03	$15,001 - $50,000

FOOTNOTES

Name Rahm I Emanuel

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	All items with a "T" reference in Block E (transactions) represent items which were transferred to blind trusts for Rahm Emanuel, Rahm Emanuel's IRA account and his dependent children.	

RAHM EMANUEL
5TH DISTRICT, ILLINOIS

COMMITTEE ON
FINANCIAL SERVICES

COMMITTEE ON THE BUDGET

Congress of the United States
House of Representatives
Washington, DC 20515–1305

WASHINGTON OFFICE
1319 LONGWORTH
HOUSE OFFICE BUILDING
202-225-4061

CHICAGO OFFICE
3742 WEST IRVING PARK ROAD
CHICAGO, IL 60618
773-267-5926

HAND DELIVERED

2004 MAY 17 PM 3:20

May 15, 2004

The Honorable Joel Hefley
Chairman
Committee on Standards of Official Conduct
US House of Representatives

The Honorable Alan B. Mollohan
Ranking Member
Committee on Standards of Official Conduct
US House of Representatives

Dear Chairman Hefley and Ranking Member Mollohan:

Enclosed please find my Financial Disclosure Statement for calendar year 2003. The statement reflects the transfer of assets to blind trust approved by the Committee on April 21, 2003.

Thank you for your consideration.

Sincerely,

Rahm Emanuel
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 18 PM 5:58

MC (Office Use Only)

Jo Ann Emerson
(Full Name)

1637 Themis Street Cape Girardeau, MO 63701
(Mailing Address)

202-225-4404
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: MO District: 8	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑	No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jo Ann Emerson	18 May 2004

SCHEDULE I - EARNED INCOME

Name Jo Ann Emerson

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Bartley, Goffstein, Bollato & Lange, LLC	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann Emerson

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
DC/ JT	EuroPacific Growth Fund, SBT	$1 - $1,000	DIVIDENDS	NONE	S
DC/ JT	Growth Fund of America, Inc	$1 - $1,000	DIVIDENDS	NONE	S
DC/ JT	Investment Co. of America	$1 - $1,000	DIVIDENDS	NONE	S
DC/ JT	Smallcap World Fund, Inc.	$1 - $1,000	DIVIDENDS	NONE	S
JT	Lucent Technologies, SEP	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Avaya	$1 - $1,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann Emerson

SP	Westcorp Smallcap SEP	$1,001 - $15,000	N/A	NONE	S
SP	Pershing Money Market Fund	$15,001 - $50,000	INTEREST	$1 - $200	
SP	7720 Building Corp. (Law Firm Building) 4399 Laclede St. Louis, MO 63108	$100,001 - $250,000	N/A	NONE	
SP	Bank of Salem SEP	$50,001 - $100,000	N/A	NONE	
SP	Bartley, Goffstein, Bollato & Lange, LLC (1/6 partner) 4399 Laclede St. Louis, MO 63108	$250,001 - $500,000	Other: Partnership Value	NONE	
SP	First Commercial Bank of Southeast Missouri (CD)	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Business Bank of St. Louis SEP	$15,001 - $50,000	N/A	NONE	
SP	New Ireland Fund SEP	$1,001 - $15,000	N/A	NONE	S
SP	Dreyfuss Premiere Greater China Fund SEP	$1,001 - $15,000	N/A	NONE	S
SP	The Evergreen Precious Metals Fund SEP	$1,001 - $15,000	N/A	NONE	S
SP	4 Seasons Racquet Club Condominium Lodge, Raquet and Country Club Osage Beach, MO 65065	$100,001 - $250,000	RENT	$5,001 - $15,000	
SP	Dreyfuss Premiere Japan Fund SEP	$1,001 - $15,000	N/A	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jo Ann Emerson

SP	ING Russia Fund SEP	$1,001 - $15,000	N/A	NONE	P
SP	Royal Dutch Petroleum SEP	$1,001 - $15,000	N/A	NONE	P
SP	K.C. Southern Corp. SEP	$1,001 - $15,000	N/A	NONE	P

SCHEDULE IV - TRANSACTIONS

Name Jo Ann Emerson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Dreyfuss Premiere Japan Fund SEP	P	11-03	$1,001 - $15,000
SP	ING Russia Fund SEP	P	11-03	$1,001 - $15,000
SP	Royal Dutch Petroleum SEP	P	10-03	$1,001 - $15,000
SP	K.C. Southern Corp. SEP	P	7-03	$1,001 - $15,000
SP	Westcorp Smallcap SEP	S	4-03	$1,001 - $15,000
SP	New Ireland Fund SEP	S	6-03	$1,001 - $15,000
SP	Dreyfuss Premiere Greater China Fund SEP	S	6-03	$1,001 - $15,000
SP	The Evergreen Precious Metals Fund SEP	S	6-03	$1,001 - $15,000
DC/JT	EuroPacific Growth Fund, SBT	S	5-03 and 8-03	$1-$1,000
DC/JT	Growth Fund of America, Inc.	S	5-03 and 8-03	$1,001 - $15,000
DC/JT	Investment Co. Of America	S	5-03 and 8-03	$1,001 - $15,000
DC/JT	Smallcap World Fund, Inc.	S	5-03 and 8-03	$1-$1,000

SCHEDULE V - LIABILITIES

Name Jo Ann Emerson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Key Bank, Boston, MA	College Loan	$15,001 - $50,000
SP	Central Bank of Lake Ozark, MO	Mortgage on rental property	$50,001 - $100,000
SP	Bank of Salem	Line of credit	$50,001 - $100,000
SP	Enterprise Bank, St. Louis, MO	Mortgage on office building (25% share)	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Jo Ann Emerson

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Public Governance Institute	Feb. 28-Mar. 2	Wash., DC--White Sulphur Springs, WV--Wash., DC	Y	Y	Y	N/A
Lexington Institute	Mar. 7-11	Wash., DC--Miami--Havana--Varadero--Havana--Miami--Wash., DC	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Jo Ann Emerson

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Advisory Committee	Arneson Institute for Practical Politics & Public Affairs, Ohio Wesleyan University, Delaware, OH
Chair	Bill Emerson Group Charities, Inc., Alexandria, VA (unpaid)
Trustee	Truman Scholarship Foundation
Honorary & Lifetime Trustee	Westminster College, Fulton, MO
Co-Chair on Board of Directors	Congressional Hunger Center

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

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LEGISLATIVE RESOURCE CENTER
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U.S. HOUSE OF REPRESENTATIVES

MC

A $200 penalty shall be assessed against anyone who files more than 30 days late.

Eliot L. Engel
(Full Name)

2264 Raybum House Office Building Washington, DC 20515
(Mailing Address)

202/225-2464
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: NY District: 17	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	**Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?**	Yes ☐ No ☑
Exemptions--	**Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?**	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Eliot L. Engel	MAY 11, 2004

SCHEDULE I - EARNED INCOME

Name Eliot L. Engel

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Issue Dynamic Inc	Spouse Salary	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eliot L. Engel

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Congressional Federal Credit Union	$15,001 - $50,000	INTEREST	$201 - $1,000	
Israeli Bonds	$1,001 - $15,000	INTEREST	$1 - $200	
State of New York	$1,001 - $15,000	Other: Retirement pension	NONE	
US Bonds	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE VI - GIFTS

Name Eliot L. Engel

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Mr. Harry Bajraktari	upgraded airplane ticket (determination on personal friendship received from Committee on Standards)	$1,000
Mr. Lewis Goldstein	hotel and food (determination on personal friendship received from Committee on Standards)	$1,250

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Eliot L. Engel

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Jersualem Summit	Oct. 11-15	NY-Tel Aviv-NY	Y	Y	N	n/a
National Association of Broadcasters	Oct. 2-3	DC-Philadelphia-DC	Y	Y	N	n/a
American Sugar Alliance	Aug. 2-8	Newark-Seattle-Newark	Y	Y	Y	Aug. 6-8
Jewish Community Relations Council of New York	Aug. 17-22	London-Israel-NY	Y	Y	Y	n/a
National Association of Broadcasters	Apr. 4-7	DC-Las Vegas-DC	Y	Y	Y	n/a
Association of American Railroads	Jan. 13-20	DC-Ft. Lauderdale-DC	Y	Y	Y	Jan. 13-16
The Public Governance Institute	Feb. 28 - Mar. 2	DC - Greenbrier - DC	Y	Y	Y	n/a
National Cable & Telecommunications Association	June 7-9	NY-Chicago-DC	Y	Y	N	n/a
Association of American Railroads	Apr. 23-27	DC-California-DC	Y	Y	Y	April 23

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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4

LEGISLATIVE RESOURCE CENTER
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U.S. HOUSE OF REPRESENTATIVES

PHILIP S. ENGLISH
(Full Name)

1410 Longworth H.O.B. WASH, DC 20515
(Mailing Address)

Daytime Telephone: (202) 225-5406

Filer Status	☒ Member of the U.S. House of Representatives — State: PA District: 3	☐ Officer or Employee — Employing Office:	**A $200 penalty shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☒	No ☐
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Philip S. English	MAY 14, 2004

1300

Name Philip S. ENGLISH | Page 2 of 4

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
General Electric, Wash, DC	Speech/Appearance	Aug. 2, 2003	$2,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A	Block B	Block C	Block D	Block E
SP	Mega Corp. Stock	$50,001 – $100,000	DIVIDENDS	$201 – $1,000	P
	Simon & Schuster	Indefinite	INTEREST	$2,501 – $5,000	
	1st Bank of Paducah, KY accounts				
JT	MERRILL LYNCH ACCOUNT	$50,001 – $100,000	DIVIDENDS, INTEREST	$201 – $1,000	
SP	MERRILL LYNCH ACCOUNT	$50,001 – $100,000	DIVIDENDS, INTEREST	$201 – $1,000	
SP	MERRILL LYNCH ACCOUNT	$1 – $1,000	INTEREST	$1 – $200	

For additional assets and unearned income, use next page.

1302

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
INTERNATIONAL MANAGEMENT AND DEVELOPMENT INSTITUTE	FEB. 17-25	WASH. D.C.- COLOGNE, BONN, GERMANY - LIECHTENSTEIN - D.C.	Y	Y	Y	3 DAYS
FAITH AND POLITICS INSTITUTE	MARCH 7-9	WASH. D.C. - MONTGOMERY, ALA SELMA - D.C.	Y	Y	N	N
TRANSATLANTIC POLICY NETWORK	APRIL 12-21	WASH. D.C.- SOTOGRANDE, SP.- SEVILLE	Y	Y	Y	6 DAYS
BRAZIL - U.S. BUSINESS COUNCIL	APRIL 21-28	SEVILLE, SP. — SAO PAULO, BRZ- BRASILIA - MANAUS - WASH., DC	Y	Y	Y	N
INVEST TO COMPETE ALLIANCE	JULY 3-7	WASH, DC — NEWPORT, R.I.- WASH, DC	Y	Y	Y	N
GE MEDICAL SYSTEMS HEALTHCARE SERVICES	JULY 31- AUG.5	ERIE, PA - SAN FRANCISCO, CA.- ERIE, PA	Y	Y	Y	3 DAYS
NOVOGRADAC AND COMPANY, LLP	DEC. 4-5	WASHINGTON, DC - LAS VEGAS - CHICAGO	Y	N	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

(9)

HAND DELIVERED
MC
(Office Use Only)

Anna Georges Eshoo
(Full Name)

40 Isabella Avenue
Atherton California 94027
(Mailing Address)

Daytime Telephone: 650-323-2984

Filer Status: [X] Member of the U.S. House of Representatives — State: District: [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Anna G. Eshoo	April-18-2004

Name Anne Georges Eshoo | Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
County of San Mateo California Retirement Fund	Legis. Pension/San Mateo County Board of Supervisors	$8,944.50

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
-NONE-			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	SP Simon & Schuster		Indefinite																	Royalties												
	1st Bank of Paducah, KY accounts						X									X												X				
	Hartford Group/Deferred Comp Plan						X							Deferred Comp Plan							X											n/a
	County of San Mateo/Retirement		X											Retirement Plan							X											n/a
	San Mateo Credit Union		X													X																n/a
	Penn Mutual Life Ins. Co.		X													X																n/a
	First Republic Bank/checking acct		X													X																n/a
	Wright Patman CU/checking acct		X													X																n/a

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ann Georges Estoo

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B	C $1,001 – $15,000	D	E $50,001 – $100,000	F	G $250,001 – $500,000	H	I $1,000,001 – $5,000,000	J	K $25,000,001 – $50,000,000	L	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	RYALTIES	EXCEPTED TRUST	CAPITAL GAIN	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Wright-Patman CU/Sugs Acct	X														X																n/a
	PaineWebber																															
	IRA			X										X								X										n/a
	Templeton Dragon Fund			X										X								X										n/a
	Pacific Intl. Equity Index Fund			X										X								X										n/a
	Federal Thrift Savings Plan													Deferred Comp.							X											n/a

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SCHEDULE IV — TRANSACTIONS

Name Amy G. Sikes

Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B ~~$1,001–$15,000~~	C $15,001–$50,000	D ~~$50,001–$100,000~~	E $100,001–$250,000	F ~~$250,001–$500,000~~	G $500,001–$1,000,000	H ~~$1,000,001–$5,000,000~~	I $5,000,001–$25,000,000	J ~~$25,000,001–$50,000,000~~	K Over $50,000,000
SP	*Example:*	Mega Corporation Common Stock	X			10-12-03		X								
	- NONE -															

This page may be copied if more space is required.

Name Anna Georges Estrada | Page 5 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Wells Fargo Bank / Home Campus Des Moines Iowa 50328	Mortgage / 40 Isabella Avenue Atherton CA 94027					
	First Republic Bank / 111 Pine St / San Francisco CA	Mortgage / 254-B Maryland Ave NE Washington D.C.					
	Bank of the West / PO Box 4008 / Concord, CA. 94524	Home Equity Line of Credit					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
-NONE-	-	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Aspen Congressional Institute Conference on U.S./China Relations Lanai Hawaii	January 17 to January 22 -2003-	San Francisco - Lanai Hawaii and return to San Francisco $3095.80 = total Grand Transport $50	Y $960	Y $710	Y sister	No
	Aspen Congressional Institute Conference on the Convergence of U.S. Natl. Security & the Global Environment Rome, Italy	May 26 to June 1 -2003-	Frankfurt - Rome - Wash. DC $1847.50 (traveled from Frankfurt due to grand transport $100	Y $250 CORPL	Y $300 Hunter	N (ending there)	N

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Name Amy G. Sykes | Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	- NONE -

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	- NONE -	

GPO: 2004 91-810 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

9

2004 MAY 12 AM 11:05 MC

(Office Use Only)

Bobby R. Etheridge
(Full Name)

1106 Mamers-Summerville Road Lillington, NC 27546
(Mailing Address)

202-225-4531
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative	State: NC District: 02	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/12/04

1313

SCHEDULE I - EARNED INCOME

Name Bobby R. Etheridge

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of North Carolina	State/Legislative Pension	$10,000
Harnett Board of Education	Spouse Salary	n/a

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bobby R. Etheridge

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Beasley Broadcast	$1,001 - $15,000	DIVIDENDS	NONE	N/A
JT	Bristol Myers Squibbs	$1,001 - $15,000	DIVIDENDS	$1-$200	P
JT	Commercial Property, Lillington East McNeil Street	$15,001 - $50,000	NONE	NONE	N/A
JT	Cornerstone Bank	$1,001 - $15,000	DIVIDENDS	NONE	N/A
JT	Dean Witter Money Market Trust	$10,001- $20,000	DIVIDENDS	$1,001 - $2,500	N/A
JT	Farm-Rt. 1, Broadway, NC	$100,001 - $550,000	RENT	$1,001 - $8000	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bobby R. Etheridge

JT	General Electric	$1,001 - $15,000	DIVIDENDS	$1-$200	N/A
JT	Honeywell International	$1,001 - $15,000	DIVIDENDS	$1-$200	N/A
JT	Intel Corporation	$1,001 - $15,000	DIVIDENDS	$1-$200	N/A
SP	IRA (Baker Hughes Inc. Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Coho Eugene & Co. Stock)	$1 - $1,000	DIVIDENDS	NONE	N/A
SP	IRA (Conoco Inc. Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
SP	IRA (Dupont Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
SP	IRA (Lucent Technology)	$1 - $1,000	DIVIDENDS	NONE	N/A
	IRA (Morgan, Stanley, Dean-Witter Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Phillip Morris Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Progress Energy)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (RBC Centura Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
SP	IRA (Sprint Com Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Sprint Com Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bobby R. Etheridge

SP	IRA (Sprint PCS Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Sprint PCS Stock)	$1,001 - $15,000	DIVIDENDS	NONE	N/A
	IRA (Unifi Inc. Stock)	$1-$1,000	DIVIDENDS	NONE	N/A
	IRA (UPS Stock)	$1 - $1,000	DIVIDENDS	NONE	N/A
JT	Kohls	$1,001-$15,000	DIVIDENDS	$2,501-$5,000	S
SP	NC State Deferred Compensation 401K	None	None	NONE	N/A
	NC State Deferred Compensation Plan (401K)	$50,001- $110,000	None	NONE	N/A
SP	NC State Retirement Pension	None	None	NONE	N/A
JT	New Century Bank	$5,001 - $40,000	DIVIDENDS	NONE	P
	Openheimer Equity Income Fund	$1,001-$15,000	DIVIDENDS	$1 - $200	N/A
	Progress Energy.	$1,001-$15,000	DIVIDENDS	$201 - $1,000	N/A
	RBC Centura (Stock)	$1 - $1,000	DIVIDENDS	$1 - $200	N/A
	RBC Centura Bank	$1,001 - $15,000	Dividends	$1-$200	N/A
JT	Rental Property, Lillington, NC (house)	$15,001 - $50,000	RENT	$2,501 - $5,000	N/A

SCHEDULE IV - TRANSACTIONS

Name Bobby R. Etheridge

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	New Century Bank	P	9-02-2003	$5,000-$40,000

SCHEDULE V - LIABILITIES

Name Bobby R. Etheridge

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Hugh McLean, Broadway, NC	Farm	$25,001-$60,000
JT	RBC	Equipment Loan	$,5000-$9,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Bobby R. Etheridge

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Nuclear Energy Institute	June 27-June28	Wash., D.C.--Barcelona--Raleigh, NC	Y	Y	Y	N/A
The Aspen Institute Congressional Program Conference on Education Reform	Feb. 14-Feb. 19	Raleigh, NC -- Montego Bay, Jamaica	Y	Y	Y	N/A
Chicago Mercantile Exchange	Oct.6-7	Wash.,D.C. - Chicago	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Bobby R. Etheridge

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board	Ochoneeche Boy Scout Council

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
4
LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 3:57
(Office Use Only)
MC

Lane A. Evans
(Full Name)

2211 Rayburn HOB Washington, DC 20515
(Mailing Address)

202-225-5905
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: IL District: 17	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐	No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐	No ☑
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lane Evans	5/14/04

1322

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Lane A. Evans

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
406 S. Capitol St., SE, Washington, DC	$250,001 - $500,000	RENT	$5,001 - $15,000	
Plow and Planters Employees Credit Union, IRA, Moline, IL	$1,001 - $15,000	INTEREST	$201 - $1,000	
Wright Patman Federal Credit Union, Savings Accounts and IRA's, Washington, DC	$100,001 - $250,000	INTEREST	$1,001 - $2,500	

SCHEDULE V - LIABILITIES

Name Lane A. Evans

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Credit Union Mortgage Association	Mortgage on 406 S. Capitol St., SE	$250,001 - $500,000

SCHEDULE VIII - POSITIONS

Name Lane A Evans

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Skills, Inc., Moline, IL
Director	Center for Mind-Body Studies, Washington, DC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(12)
LEGISLATIVE ... COUNSEL
2004 MAY 17 AM 11:24
... HOUSE OF REPRESENTATIVES
(Office Use Only)

HC

R. TERRY EVERETT
(Full Name)

2312 RAYBURN BUILDING
(Mailing Address)

WASHINGTON, D.C. 20515

Daytime Telephone: (202) 225-2901

Filer Status	[x] Member of the U.S. House of Representatives — State: AL District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [✓]	No [✓]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [x]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Terry Everett	5/17/04

Name R. TERRY EVERETT

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
U.S. House of Representatives - Congressman	U.S. Representative	138,050
Union Springs Newspapers - Wife	Management	18,600

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NONE			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name R. TERRY EVERETT

Page 4 of 12

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transactlon

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	Block B Value of Asset	Block C Type of Income	Block D Amount of Income	Block E P, S, E
SP	Examples: Mega Corp. Stock	E ($50,001 – $100,000)	Dividends	IV	P
	Simon & Schuster	Indefinite	Royalties	IX ($100,001 – $1,000,000)	
	1st Bank of Paducah KY accounts		Interest	VI	
	400 Acre Farm Houston County, AL	H	Rent	VI	
	On Farm		Other: Grain & Hay	VI	
	On Farm		Other: FSA	VI	
	Stock in Union Springs Newspapers	G ($250,001 – $500,000)	Dividends	I (None)	S, E
	Note Receivable: U.S. News, LLC	F	Interest	V ($2,501 – $5,000)	E
	Due from: Everett For Congress	G ($250,001 – $500,000)	Interest	I (None)	

Block B columns: A None; B; C $1,001 – $15,000; D; E $50,001 – $100,000; F; G $250,001 – $500,000; H; I $1,000,001 – $5,000,000; J; K $25,000,001 – $50,000,000; L.

Block C columns: Dividends; Rent; Interest; Capital Gains; Excepted Trust; Qualified Blind Trust; Other Type of Income (Specify: For Example, Partnership Income or Farm Income).

Block D columns: I None; II; III $201 – $1,000; IV; V $2,501 – $5,000; VI; VII $15,001 – $50,000; VIII; IX $100,001 – $1,000,000; X; XI Over $5,000,000.

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name R. TERRY EVERETT

Page 5 of 12

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,001 - $15,000	C $15,001 - $50,000	E $50,001 - $100,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIV/DEVDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Merrill Lynch - 52296																												
	CMA		X										X					X											
	AIM Global Science			X							X							X											E
	Invesco Technology				X						X									X									E
	Merrill Lynch - 16632																												
	CMA		X										X							X									E
	PFL Endeavor Var. Anuity					X					X													X					E
	Merrill Lynch - 52295																												
	AIM Global Science			X							X							X											E
	CMA		X										X					X											
	Invesco Technology			X							X								X										E
	Merrill Lynch - 16288																												
	CMA		X										X							X									S, partial transfer

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name R. TERRY EVERETT

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Merrill Lynch - 24252																															
	CMA						X									X								X								
	Municipal Bonds:																															
	N. Richland Hills, TX						X									X										X						
	Jefferson Co., TX						X									X										X						
	West VY City, UT						X									X										X						
	Sequin, TX Indpt						X									X										X						
	Laredo, TX Comm. College						X									X										X						
	Washoe Co. NV Reno Sparks						X									X										X						
	Penn State Higher Ed.						X									X										X						
	Little Elm TX Indpt						X									X										X						
	King Co., WA Swr. Rev.						X									X										X						
	New Waverly, TX Indpt.						X									X										X						
	Bellwood, IL						X									X										X						
	Birmingham, AL Wtrwks.						X									X										X						
	Indianapolis, IN LCL Pub						X									X										X						
	Bastrop TX Indpt.						X									X										X						
	Thrift Savings (401k)						X									X										X						P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name R. TERRY EVERETT

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	First Federal of South																															
	Checking			X												X						X										
	SunSouth Bank - Checking							X								X										X						E
	SunSouth Bank - Investment																															
	Acct. from CDs & Stock Sales							X								X										X						E
	IRA - (H) - SunSouth				X											X							X									
	IRA - (w) - SunSouth				X											X							X									
	Congressional Federal C.U.																															
	Checking						X									X								X								
	Savings			X												X						X										
	BankSouth - CDs						X									X										X						
	Merrill Lynch - IRA (H)				X									X									X									P
	2 Notes Receivable on																															
	Personal Residences in																															
	Coffee & Houston Co., AL					X										X									X							

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SCHEDULE IV — TRANSACTIONS

Name R. TERRY EVERETT

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	Stock in Union Springs Newspapers		X	X	7/30/03			X							
	Stock in Union Springs Newspapers		X	X	7/30/03				X						
	Note Receivable - U.S. News, LLC	X		X	7/30/03				X						
	(Congressman Everett sold Union Springs														
	newspapers and took a note on sale)														
	Merrill Lynch - 52296														
	AIM Global Science exchanged for			X	3/11/03	X									
	Invesco Tech			X			X								
	Merrill Lynch - 16632														
	CMA exchanged for			X	3/11/03				X						
	PFL Endeavor Var. Annuity			X	3/11/03				X						
	Merrill Lynch - 52295														
	AIM Global Science exchanged for			X	3/11/03		X								
	Invesco Tech			X	3/11/03		X								
	Merrill Lynch - 16288														
	CMA - Partial Transfer		X	X	3/11/03				X						

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SCHEDULE IV — TRANSACTIONS

Name R. TERRY EVERETT

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	SunBank CDs to SunSouth Bank Investment Acct.			X	7/30/03					X					
	SunBank checking to SunSouth Bank checking			X	7/30/03					X					
	Merrill Lynch IRA Rollover	X			1/07/03		X								
	Thrift Savings 401k (to add to Congressman Everett's assets)	X			12/31/03				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: [redacted]	C $15,001–$50,000	[redacted]	E $100,001–$250,000	[redacted]	G $500,001–$1,000,000	[redacted]	I $5,000,001–$25,000,000	[redacted]	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	BankSouth	Campaign Loans				X						
	SunSouth Bank	Campaign Loans				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
American Sugar Beet Growers Assn.							
(Speaker)		2/3/03	Dothan, AL - Savannah, GA	N	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

7

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 2:13
CLERK
HC
(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Sam Farr
(Full Name)

1221 Longworth House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-2861
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: CA District: 17	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Sam Farr	5-17-04

1338

SCHEDULE I - EARNED INCOME

Name Sam Farr

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Financial Transitions Institute	Spouse Salary	N/A
Hospice of Monterey	Spouse Salary	N/A
Community Hospital of Monterey County (CHOMP)	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Farr

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Chevy Chase Land Company	$50,001 - $100,000	DIVIDENDS	$5,001 - $15,000	
Devil's Flat Association	$15,001 - $50,000		NONE	
Point 16, Big Sur, CA	$500,001 - $1,000,000	RENT	$2,501 - $5,000	
Sharlands Investment Company	$1,001 - $15,000		NONE	
Columbia Channel Gold Mine	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Interest - CA State Retirement	$15,001 - $50,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Farr

	Sorensen's Resort	$15,001 - $50,000	Partner	$2,501 - $5,000	
	Tahoe Cabin	$15,001 - $50,000	RENT	$2,501 - $5,000	
	Lots 7, 9, 10 (SE corner of Santa Lucia & Camino Real in Carmel, CA)	$250,001 - $500,000		NONE	
	The following stocks were acquired as a result of father's death and the dissolution of the Janet H. Farr Trust:				
	Boeing Company Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Bristol Myers Squib	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Chevron Corp. Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Colgate Palmolive Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	General Electric Stock	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Hewlett Packard Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	IBM Corp. Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Motorola Inc. Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Washington Mutual Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Farr

	Vista Lobos Apartments (Interest held through the Farr Children's Trust and the Delores Farr Trust. Filer is 50% beneficiary)	$250,001 - $500,000	RENT	$15,001 - $50,000	
	Morgan Stanley Dean Witter (mutual funds and money market)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Congressional Federal Credit Union (Savings Account)	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Congressional Federal Credit Union (IRA)	$1,001 - $15,000	INTEREST	$201 - $1,000	
	Hartford Financial Services Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Intel Corp. Stock	$50,001 - $100,000	DIVIDENDS	$1 - $200	
	Pfizer Inc. Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Medco Health Solutions Inc. Stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Merck & Co. Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE V - LIABILITIES

Name Sam Farr

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Morgan Stanley Margin Account	Margin Account (Paid off in 2003)	$50,001 - $100,000

SCHEDULE VII - TRAVEL PA /MENTS AND REIMBURSEMENTS

Name Sam Farr

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Center for International Policy (Fact-finding Trip)	Jan 12-17	Santa Cruz--Guama, Cuba--Miami	Y	Y	N	N/A
Urbanists International (Educational Trip)	Feb 21-24	Wash., D.C.--Cuba--Wash., D.C.	Y	Y	N	N/A
The Congressional Program of the Aspen Institute (Conference on Global Environment)	May 26-June 1	Wash., D.C.--Rome, Italy--Wash., D.C.	Y	Y	Y	N/A
The Faith & Politics Institute (Educational Group Discussions)	Sept. 12-14	Wash., D.C.--Potomac, MD--Wash., D.C.	Y	Y	Y	N/A
Public Governance Institute (Meetings w/California Officials on California's Future	Dec 5-7	Monterey--Palm Springs--Wash., D.C.	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 PM 2:28
(Office Use Only)

Chaka Fattah
(Full Name)

2301 Rayburn Washington, DC 20515
(Mailing Address)

(202) 225-4001
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: PA District: 02	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Chaka Fattah	5-14-04

1345

SCHEDULE I - EARNED INCOME

Name Chaka Fattah

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
NBC Channel 10	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Chaka Fattah

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Self	PA State Employee Retirement System	$50,001 - $100,000	Pension reported as earned income	$2,501 - $5,000	N/A
SP	GE	$100,001 - $250,000	401K	NONE	N/A
Self	Congressional Federal Credit Union Savings Account	$1 - $1,000	INTEREST	$100,001 - $1,000,000	N/A

SCHEDULE V - LIABILITIES

Name Chaka Fattah

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
S	Wachovia	Line of Credit	$15,001 - $50,000
SP	American Financial	Student Loan	$10,001 - $15,000

SCHEDULE VIII - POSITIONS

Name Chaka Fattah

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Philadelphia Futures

MC

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Chaka Fattah

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year. LEGISLATIVE RESOURCE CENTER 2004 JUN -1 PM 12:35 OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES
Self	PA State Employee Retirement System	$50,001 - $100,000	Pension reported as earned income	$2,501 - $5,000	N/A
SP	GE	$100,001 - $250,000	401K	NONE	N/A
Self	Congressional Federal Credit Union Savings Account	$100,001 - $250,000	INTEREST	$1,001 - $2,500	N/A

HAND DELIVERED

1350

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 10 PM 5:48
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Thomas C. Feeney, III
(Full Name)

3994 Carnaby Street
(Mailing Address)

Daytime Telephone

Oviedo, FL 32765

Filer Status	[X] Member of the U.S. House of Representatives — State: Florida District: 24	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tom Feeney	May 6, 2004

1351

Name Thomas C. Feeney, III	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. House of Representatives	Salary	$126,669.06
	Space Gateway Support	Spouse Salary	$ 48,023.86

For payments to charity in lieu of honoraria, use Schedule II.

Name	Thomas C. Feeney, III	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NOT APPLICABLE			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income					Block D: Amount of Income											Block E: Transaction
			A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAIN	EXCEPTED TRUST	Other Type of Income (Specify, For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP	Mega Corp. Stock					X								X																	P
		Simon & Schuster			Indefinite															Royalties								X			
		1st Bank of Paducah, KY accounts						X									X															
JT	7684 Autumn Wood Dr Orlando, FL																															
JT	12063 Gray Birch Circle Orlando, FL								X							X									X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas C. Feeney, III

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	IRA Megellan		X								N/A							
	Profit Sharing Keogh			X							N/A							
SP	401 K			X							N/A							
	EE Bonds		X								N/A							
	Certificate of Dep		X								N/A							
	D.C. Thrift Sav Plan		X								N/A							

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	Sale of Vehicle/Miatta		X		Oct '03	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Crown Bank Mortgage, FL	Mortgage Autumn Wood Rental			X							
JT	Countrywide Home Loans, CA	Mortgage Gray Birch Rental				X						
JT	Systems & Services Tech Inc., MO	Spouse Auto		X								
JT	MBNA America, DE	Revolving Charge Account		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NOT APPLICABLE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Hong Kong FDTN Korea - US Exchange Comm	Feb 14-22	Wash., D.C.	Y	Y	N	N
	Community Finances Services Association	Feb 28	Orlando - Palm Beach	N	Y	N	N
	Nat'l Center for Public Policy Research	Aug 9-14	BWI-Scotland-BWI	Y	Y	N	N
	American Israel Education Foundation	Aug 23-31	Orlando-Israel-Orlando	Y	Y	N	N
	Rotterman & Assoc.	Nov 13-16	Orlando-Palm Beach - Orlando	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Central Florida Children's Home

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NOT APPLICABLE	

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

05

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 13 AM 9:29
MC
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MICHAEL A. FERGUSON
(Full Name)

6 BROKEN ARROW ROAD, WARREN, NJ
(Mailing Address)

(202) 225-5361
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: NEW JERSEY District: 7TH	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Michael Ferguson	5/13/04

1360

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ALL EARNED INCOME WAS FROM FILER'S EMPLOYMENT WITH THE U.S. GOVERNMENT	N/A	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
N/A	N/A	N/A	N/A

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Name MICHAEL A. FERGUSON

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B	Block C	Block D	Block E
			None / $1 - $1,000 / $1,001 - $15,000 / $15,001 - $50,000 / $50,001 - $100,000 / $100,001 - $250,000 / $250,001 - $500,000 / $500,001 - $1,000,000 / $1,000,001 - $5,000,000 / $5,000,001 - $25,000,000 / $25,000,001 - $50,000,000 / Over $50,000,000	DIVIDENDS / RENT / INTEREST / CAPITAL GAINS / EXCEPTED TRUST / QUALIFIED BLIND TRUST / Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None / $1 - $200 / $201 - $1,000 / $1,001 - $2,500 / $2,501 - $5,000 / $5,001 - $15,000 / $15,001 - $50,000 / $50,001 - $100,000 / $100,001 - $1,000,000 / $1,000,001 - $5,000,000 / Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock			X		P
	DC Simon & Schuster		Indefinite		Royalties	
	JT 1st Bank of Paducah, KY accounts		X	X	X	
JT	MERRILL LYNCH - #XX-XXX 44		X			
JT	MERRILL LYNCH - #XX-XXX 45		X			
	MERRILL LYNCH ROTH IRA	X				
SP	MERRILL LYNCH ROTH IRA	X				
	MERRILL LYNCH IRA	X				
SP	MERRILL LYNCH IRA	X				

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MICHAEL A. FERGUSON

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset										BLOCK C Type of Income					BLOCK D Amount of Income									BLOCK E Transaction
		A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	S, P, E

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SCHEDULE IV — TRANSACTIONS

Name MICHAEL A. FERGUSON

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	MERRILL LYNCH - SEE ATTACHED STATEMENTS														

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
2/29/03	BOT		3	DARDEN RESTAURANTS INC	20.5452	61
2/29/03	SLD		16C	MERCK&CO INC	45.4171	726C
2/29/03	BOT		10	ZIMMER HOLDINGS INC CO	70.6191	706
2/22/03	SLD		13C	GENERAL MILLS	45.2434	588C
2/22/03	SLD		25C	HOME DEPOT INC	34.8262	870C
2/22/03	BOT		56	NOVELL INC	9.8298	550
2/22/03	BOT		32	TEXAS INSTRUMENTS	28.8881	924
2/11/03	BOT		6	ALLIED WASTE INDS NEW	12.5162	75
2/11/03	BOT		1	BJ SERVICES CO	35.4530	35
2/11/03	BOT		10	COMPUTER ASSOC INTL INC	23.6348	236
2/11/03	BOT		3	FIRST MIDWST BANCORP DE	31.8900	95
2/11/03	BOT		5	KING PHARMACEUTICALS IN	13.7140	68
/11/03	SLD		7C	SOVEREIGN BANCRP INC CO	21.8278	152C
/11/03	BOT		6	TOTAL S.A. SP AD	85.5542	513
/10/03	SLD		12C	KONINKL PHIL E NY SH NE	28.2971	339C
/10/03	SLD		39C	NEC CORP AD	6.6318	258C
/09/03	BOT		11	PFIZER INC DEL PV$0.05	34.5178	379
/08/03	SLD		11C	DELUXE CORPORATION	40.4357	444C
/01/03	SLD		11C	AMGEN INC COM PV $0.000	58.6045	644C
/01/03	BOT		21	GENERAL ELECTRIC	28.9611	608
/25/03	BOT		20	ALLIED WASTE INDS NEW	12.3488	246
/25/03	SLD		10C	LINENS N THINGS INC	28.9082	289C
/25/03	SLD		3C	J C PENNEY CO COM	24.9509	74C
/25/03	DIV		13	SYMANTEC CORP CO	.0000	0
/25/03	DUDB		13C	SYMANTEC CORP CO	.0000	0
/24/03	SLD		11C	AMGEN INC COM PV $0.000	58.9879	648C

NFORMATION PURPOSES ONLY - ACCOUNT STATEMENT IS OFFICIAL RECORD
INFO MUST NOT BE USED IN PLACE OF THE MERRILL LYNCH TAX REPORTING
MENT FOR TAX INFORMATION.

<MORE>

PRC

FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
1/24/03	BOT		21	MICROSOFT CORP	25.6113	537
1/21/03	DIV		8	ELECTRONIC ARTS INC DE	.0000	0
1/21/03	DUDB		8C	ELECTRONIC ARTS INC DE	.0000	0
1/20/03	DUDB		13	SYMANTEC CORP CO	.0000	0
1/18/03	DUDB		8	ELECTRONIC ARTS INC DE	.0000	0
1/17/03	BOT		13	HALLIBURTON COMPANY	23.8000	309
1/17/03	BOT		4	LIMITED BRANDS INC	17.3256	69
1/17/03	BOT		2	RAYTHEON CO DELAWARE NE	27.3798	54
1/17/03	SLD		7C	UNOCAL CORP	31.3245	219C
1/14/03	XCH		7	BIOGEN IDEC INC	.0000	0
1/14/03	XCH		7C	IDEC PHARMCTLS CORP DEL	.0000	0
1/14/03	BOT		10	MEDIMMUNE INC	26.1106	261
1/11/03	DIV		14	BOSTON SCIENTIFIC CORP	.0000	0
1/11/03	DUDB		14C	BOSTON SCIENTIFIC CORP	.0000	0
./11/03	SLD		6C	COMPUTER SCIENCE CRP	40.9854	245C
./11/03	SLD		13C	KNIGHT TRADING GROUP IN	14.3551	186C
./11/03	BOT		6	SBC COMMUNICTNS INC PV$	23.4037	140
./10/03	BOT		10	AVON PROD INC	68.2435	682
./10/03	BOT		10	BALL CORP CO	55.4782	554
/10/03	SLD		18C	BED BATH & BEYOND INC	41.7230	750C
/10/03	BOT		14	HARLEY DAVIDSON INC WIS	47.2579	661
/10/03	SLD		17C	MEDIMMUNE INC	25.3182	430C
/10/03	SLD		23C	PMC SIERRA INC COM	21.3075	490C
/10/03	SLD		5C	PROCTER GAMBLE	96.2722	481C
/06/03	DUDB		14	BOSTON SCIENTIFIC CORP	.0000	0
/05/03	BOT		35	AU OPTRONICS CORP ADR	13.4492	470
/05/03	SLD		5C	BAUSCH LOMB INC	48.1471	240C
/05/03	BOT		25	KUBOTA CORP AD	19.2920	482
/04/03	BOT		26	KING PHARMACEUTICALS IN	13.2644	344
/31/03	SLD		13C	REED ELSEVIER PLC SP AD	31.1360	404C
/31/03	SLD		10C	SCHLUMBERGER LTD	46.2157	462C
/30/03	SLD		3C	COMPUTER SCIENCE CRP	39.4631	118C
/30/03	SLD		2C	COMPUTER SCIENCE CRP	39.4631	78C
/28/03	BOT		7	AMERICAN AXLE&MFG HLDGS	33.5342	234
/28/03	SLD		8C	KNIGHT TRADING GROUP IN	13.8706	110C
/28/03	SLD		3C	MAGNA INTL INC CL A VTG	77.6911	233C
23/03	BOT		2,000	ALCOA INC	103.6150	2,103
23/03	BOT		2,000	HOUSEHOLD FINANCE CORP	108.5370	2,199
22/03	SLD		3,000C	HONEYWELL INTERNATIONAL	108.8270	3,278C
22/03	BOT		9	BANK OF IRELAND SPNS AD	49.3895	444
21/03	SLD		8C	DEUTSCHE BANK AG REG	66.5532	532C
20/03	SLD		8C	FREEPRT-MCMRAN CPR&GLD	36.6344	293C
20/03	SLD		11C	INTL GAME TECHNOLOGY	30.6642	337C
20/03	BOT		8	NIKE INC CL B	63.7956	510

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
0/17/03	SLD		12C	ARCHER DANIELS MIDLD	13.6850	164C
0/17/03	SLD		8C	CONVERGYS CORP	18.0101	144C
0/17/03	BOT		2	COMPUTER SCIENCE CRP	39.3728	78
0/17/03	BOT		8	JANUS CAPITAL GROUP INC	14.0522	112
0/14/03	BOT		12	ITO YOKADO LTD ADR 2003	39.9664	479
0/10/03	SLD		25C	HONDA MOTOR ADR NEW	20.0962	502C
0/10/03	SLD		6C	J C PENNEY CO COM	22.3154	133C
0/09/03	BOT		12	DEL MONTE FOODS CO	8.9646	107
0/09/03	SLD		6C	J C PENNEY CO COM	22.3154	133C
0/09/03	CXLS		6	J C PENNEY CO COM	22.3154	133
0/06/03	BOT		52	AVAYA INC	11.0163	572
0/06/03	BOT		6	AUTOZONE INC NEVADA CO	93.7252	562
0/06/03	BOT		10	INTEL CORP	29.4961	294
0/06/03	SLD		19C	JOHNSON AND JOHNSON CO	49.8602	947C
0/06/03	SLD		11C	ST JUDE MEDICAL INC	52.7982	580C
0/03/03	BOT		3	INFOSYS TECH LTD ADR	73.5720	220
0/02/03	SLD		8C	HSBC HLDG PLC ADR	68.6706	549C
0/01/03	BOT		3	COMPUTER SCIENCE CRP	37.9207	113
0/01/03	BOT		11	WEBMD CORP DELAWARE CO	8.9740	98
9/29/03	BOT		33	INTEL CORP	27.6734	913
9/29/03	SLD		79C	ORACLE CORP $0.01 DE	11.4235	902C
/26/03	BOT		5	MERCK&CO INC	50.7765	253
/26/03	XCHC		18C	QUINTILES TRANSNATL COR	.0000	261C
/23/03	BOT		9,667	FNMA P555456 05 50%2018	103.1875	7,249
/23/03	BOT		2	ACE LTD	33.3647	66
/23/03	SLD		6C	BECKMAN COULTER INC CO	46.7805	280C
/23/03	BOT		3	CORRECTIONS CORP OF AME	25.2787	75
/23/03	SLD		7C	EARTHLINK INC COM	8.8624	62C
/23/03	SLD		7C	J C PENNEY CO COM	22.7500	159C
/19/03	BOT		3	INFOSYS TECH LTD ADR	69.7500	209
/19/03	SLD		2C	MEDCO HEALTH SOLUTIONS	24.5255	49C
/18/03	BOT		8	BRITISH AWYS PLC ADR	30.7831	246
/18/03	BOT		5	DIAGEO PLC SPSD ADR NEW	44.3950	221
/18/03	SLD		9C	NESTLE S A REP RG SH AD	56.4170	507C
/16/03	SLD		2C	EATON CORP	92.2034	184C
/16/03	BOT		6	WEBMD CORP DELAWARE CO	9.4092	56
/15/03	SLD		9C	AUTOZONE INC NEVADA CO	87.3324	785C
/15/03	BOT		6	GENERAL ELECTRIC	31.6158	189
/15/03	BOT		17	INTEL CORP	28.0353	476
/10/03	BOT		39	NEC CORP AD	8.0409	313
/09/03	BOT		14	ENDESA S.A. SPONSORD AD	15.9742	223
/09/03	SLD		5C	TOTAL S.A. SP AD	78.9121	394C
/09/03	BOT		12	WEBMD CORP DELAWARE CO	8.9434	107
08/03	BOT		25	CITRIX SYSTEMS INC CO	21.8027	545

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
9/08/03	SLD		11C	JOHNSON AND JOHNSON CO	51.3569	564C
9/08/03	SLD		1C	MI DEVELOPMENTS INC-W/I	20.1500	20C
9/08/03	SLD		3C	MEDCO HEALTH SOLUTIONS	25.3300	75C
9/05/03	DIV		1	MI DEVELOPMENTS INC-W/I	.0000	0
9/05/03	SLD		6C	NATIONAL GRID TRNSCO AD	30.0906	180C
9/04/03	DIV		9	EBAY INC CO	.0000	0
9/04/03	DUDB		9C	EBAY INC CO	.0000	0
8/29/03	DUDB		9	EBAY INC CO	.0000	0
8/28/03	BOT		43	COMPUWARE CORP	5.5993	240
8/28/03	SLD		1C	COMPUTER SCIENCE CRP	41.5216	41C
8/28/03	SLD		3C	MCKESSON CORPORATION CO	32.2182	96C
8/28/03	BOT		13	PEOPLESOFT INC CO	17.5642	228
8/28/03	SLD		5C	SUNGARD DATA SYS INC	27.9718	139C
8/25/03	DIV		6	MEDCO HEALTH SOLUTIONS	.0000	0
8/25/03	DUDB		6C	MEDCO HEALTH SOLUTIONS	.0000	0
8/21/03	SLD		9C	CHARTER ONE FINL INC CO	31.2317	281C
8/21/03	BOT		9	FIRST MIDWST BANCORP DE	30.7500	276
8/20/03	DUDB		6	MEDCO HEALTH SOLUTIONS	.0000	0
8/18/03	SLD		3C	BAUSCH LOMB INC	41.7460	125C
8/18/03	BOT		22	BRISTOL-MYERS SQUIBB CO	25.9157	570
8/18/03	SLD		6C	CENDANT CORP $0.01	17.5000	104C
8/18/03	BOT		5	CDW CORP	50.9945	254
8/18/03	BOT		2	CORRECTIONS CORP OF AME	21.6076	43
8/18/03	SLD		20C	ECOLAB INC	25.9956	519C
8/18/03	SLD		2C	FEDRTD DPT STORS DEL NE	42.3500	84C
8/18/03	SLD		14C	FOREST LABS INC	42.9753	601C
8/18/03	SLD		6C	JANUS CAPITAL GROUP INC	17.8435	107C
8/18/03	SLD		3C	MARTIN MARIETTA MATLS	38.1093	114C
8/18/03	SLD		1C	MAGNA INTL INC CL A VTG	80.1905	80C
8/18/03	BOT		20	RADIOSHACK CORP	27.2525	545
8/18/03	BOT		6	WESTPAC BANKING SPON AD	54.8782	329
8/18/03	BOT		6	WEBMD CORP DELAWARE CO	10.6944	64
8/15/03	SLD		10C	CANON INC ADR REP5SH	47.1472	471C
8/15/03	SLD		7C	NOVARTIS ADR	37.4183	261C
8/15/03	SLD		18C	NOKIA CORP ADR	14.6830	264C
8/15/03	BOT		5	TDK CORP AMERN DEP SH	61.0971	305
8/15/03	BOT		13	TOMKINS PLC SP ADR	17.2817	224
8/15/03	SLD		6C	TOYOTA MOTOR CORP ADR	55.6552	333C
8/12/03	XCH		5C	TELECOM ITALIA SPA SPAD	.0000	0
8/12/03	XCH		16	TELECOM ITALIA S P A NE	.0000	0
8/11/03	BOT		26	BROADCOM CORP CALIF CL	20.9747	545
11/03	SLD		17C	BIOMET INC CO	28.4551	483C
11/03	SLD		18C	FANNIE MAE (USA) COM NP	63.9597	1,151C
11/03	BOT		35	NETWORK APPLIANCE INC C	15.5391	543

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
`: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
1/11/03	BOT		49	PMC SIERRA INC COM	10.7095	524
1/07/03	DIV		2	TAIWAN S MANUFCTRING AD	.0000	0
1/07/03	DUDB		2C	TAIWAN S MANUFCTRING AD	.0000	0
1/04/03	BOT		2	GENZYME CORP GEN'L DIV	46.6700	93
1/04/03	SLD		9C	LEXMARK INTL INC CL A	62.9514	566C
1/04/03	BOT		5	PROCTER GAMBLE	87.4492	437
'/28/03	BOT		10	GENZYME CORP GEN'L DIV	51.6195	516
'/28/03	BOT		7	HOME DEPOT INC	31.5146	220
'/28/03	SLD		15C	PROCTER GAMBLE	88.1783	1,322C
'/28/03	BOT		90	SPRINT CORP PCS COM SR	6.5365	588
'/28/03	SLD		13C	STAPLES INC	20.3953	265C
'/28/03	BOT		8	WHIRLPOOL CORP	65.5104	524
'/28/03	SLD		8C	YAHOO INC CAL PV$0.0001	32.3894	259C
/23/03	BOT		19	BHP BILLITON LTD AD	12.3702	235
/23/03	XCH		50	DELL INC	.0000	0
/23/03	XCH		50C	DELL COMPUTER CORP	.0000	0
/23/03	BOT		3	ENI S P A SPONSORED AD	75.5556	226
/23/03	BOT		3	RIO TINTO PLC SPNSRD AD	82.6270	247
/22/03	SLD		48C	ASML HLDNG NV NY REG SH	12.1904	585C
/22/03	BOT		8	BP PLC SPON AD	40.8679	326
/22/03	SLD		9C	DOLLAR TREE STORES INC	34.2593	308C
/22/03	BOT		4	DARDEN RESTAURANTS INC	19.0333	76
/22/03	BOT		3	NOBLE ENERGY INC	37.0321	111
/22/03	SLD		37C	TAIWAN S MANUFCTRING AD	9.7490	360C
/18/03	BOT		4,000	U.S. TREASURY NOTE	100.5781	4,052
/17/03	SLD		3,000C	FORD MOTOR CREDIT	103.9100	3,120C
/15/03	BOT		3	SOVEREIGN BANCRP INC CO	16.7577	50
/14/03	SLD		9C	BALL CORP CO	43.3462	390C
/14/03	BOT		1	BANKNORTH GROUP MAIN	26.9841	26
/14/03	BOT		4	COCA COLA ENTERPRISES	19.4744	77
/14/03	BOT		11	HOME DEPOT INC	33.8531	372
/14/03	SLD		11C	KNIGHT TRADING GROUP IN	9.2174	101C
/09/03	DIV		24	INTL GAME TECHNOLOGY	.0000	0
/09/03	DUDB		24C	INTL GAME TECHNOLOGY	.0000	0
/09/03	BOT		38	MATSUSHTA EL IND AD	12.1001	459
/09/03	BOT		20	NIPPON TELG&TEL SPDN AD	22.5872	451
/08/03	SLD		7C	ROYAL DUTCH PETE NY SHS	46.0033	322C
/08/03	SLD		8C	UNILEVER NV NY REG SHS	54.5986	436C
/07/03	SLD		28C	DOUBLECLICK INC DEL CO	10.6638	298C
07/03	DUDB		2	TAIWAN S MANUFCTRING AD	.0000	0
07/03	BOT		22	WEBMD CORP DELAWARE CO	11.6294	255
03/03	DUDB		24	INTL GAME TECHNOLOGY	.0000	0
02/03	SLD		39C	BANCO SANT CTL HISP ADR	8.7322	340C
02/03	BOT		6	DAIWA HOUSE IND LTD AD	69.2745	415

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
7/02/03	SLD		24C	TAIWAN S MANUFCTRING AD	10.1259	243C
7/01/03	SLD		33C	MATTEL INC CO	18.6753	616C
7/01/03	SLD		3C	NATL AUSTRALIA B SPN AD	113.6137	340C
7/01/03	SLD		12C	VERIZON COMMUNICATNS CO	39.2043	470C
6/30/03	BOT		13	BEST BUY CO INC	43.8242	569
6/30/03	BOT		17	VERITAS SOFTWRE DE $.00	28.9299	491
6/24/03	BOT		7	IDEC PHARMCTLS CORP DEL	36.2400	253
6/24/03	BOT		16	BECTON DICKINSON CO	37.4262	598
6/24/03	SLD		6C	BIOGEN INC MASS	40.8752	245C
6/24/03	DIV		9	UNITEDHEALTH GROUP INC	.0000	0
6/24/03	DUDB		9C	UNITEDHEALTH GROUP INC	.0000	0
6/24/03	BOT		58	XEROX CORP	10.3378	599
6/23/03	SLD		14C	ANHEUSR BUSCH COS INC	50.7916	711C
6/23/03	BOT		11	CORRECTIONS CORP OF AME	23.3654	257
6/23/03	SLD		15C	EARTHLINK INC COM	7.3434	110C
6/23/03	BOT		22	HOME DEPOT INC	31.9741	703
6/23/03	BOT		8	MGM MIRAGE INC 1 CT CO	32.7710	262
6/23/03	SLD		23C	PACTIV CORPORATION	19.0631	438C
6/23/03	SLD		20C	QUALCOMM INC	35.7201	714C
6/23/03	SLD		17C	SYMBOL TECHNOLOGIES DEL	13.7041	232C
/19/03	DUDB		9	UNITEDHEALTH GROUP INC	.0000	0
/18/03	BOT		12	COCA COLA ENTERPRISES	19.6381	235
/18/03	BOT		10	LINENS N THINGS INC	24.4720	244
/17/03	SLD		17C	KNIGHT TRADING GROUP IN	6.9029	117C
/13/03	SLD		18C	ALLIED IRSH BKS SPND AD	29.8004	536C
/13/03	BOT		37	NOMURA HLDGS INC AD	12.2000	451
/13/03	SLD		11C	PEOPLESOFT INC CO	16.9681	186C
/12/03	DIV		10	ECOLAB INC	.0000	0
/12/03	DUDB		10C	ECOLAB INC	.0000	0
/11/03	SLD		13C	EARTHLINK INC COM	7.4175	96C
/11/03	SLD		4C	PEOPLESOFT INC CO	17.6293	70C
/09/03	BOT		10	CHINA PETE CHEM SPN AD	22.6313	226
/09/03	BOT		27	DOLLAR GENL CORP PV$0.0	17.9176	483
/09/03	DUDB		10	ECOLAB INC	.0000	0
/09/03	SLD		99C	SPRINT CORP PCS COM SR	5.2317	517C
/04/03	SLD		8C	COMPUTER SCIENCE CRP	39.8068	318C
/02/03	BOT		4	ANHEUSR BUSCH COS INC	53.1682	212
/02/03	SLD		5C	BOSTON SCIENTIFIC CORP	51.7088	258C
/28/03	BOT		2	CNF INC DEL CO	29.1795	58
/28/03	BOT		13	DARDEN RESTAURANTS INC	19.0060	247
/28/03	SLD		15C	KNIGHT TRADING GROUP IN	5.9409	89C
28/03	SLD		3C	OUTBACK STEAKHOUSE INC	36.5834	109C
28/03	BOT		15	PEOPLESOFT INC CO	15.9777	239
28/03	SLD		8C	SYMBOL TECHNOLOGIES DEL	13.2500	105C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION		PRICE	NET AMOUNT
/23/03	BOT		5	AMER EAGLE OUTFITTERS		15.3333	76
/23/03	SLD		5C	BURLINGTON RESOURCES IN		51.7080	258C
/23/03	SLD		23C	COMPUTER ASSOC INTL INC		21.4832	494C
/23/03	BOT		11	DEL MONTE FOODS CO		8.6562	95
/23/03	BOT		2	FEDRTD DPT STORS DEL NE		31.1000	62
/23/03	SLD		8C	NUCOR CORPORATION		44.7204	357C
/22/03	BOT		1,096	FNMA P687296 05 50%2018		104.2968	1,073
/20/03	BOT	N	1,000	U.S. TREASURY NOTE		117.7031	1,178
/19/03	BOT		19	CISCO SYSTEMS INC	CO	16.2314	308
/19/03	SLD		12C	CLOROX CO DEL COM		41.5415	498C
/19/03	BOT		11	DELUXE CORPORATION		44.5160	489
/19/03	SLD		20C	INTL FLAVORS&FRAGRNC		32.0766	641C
/19/03	BOT		17	MEDIMMUNE INC		34.5874	587
/19/03	BOT		8	PFIZER INC DEL PV$0.05		32.0741	256
/19/03	SLD		29C	SARA LEE CORP	CO	17.3264	502C
/16/03	BOT		6	LIMITED BRANDS INC		13.6207	81
/16/03	SLD		4C	NOBLE ENERGY INC		33.5593	134C
/16/03	BOT		8	J C PENNEY CO COM		17.0000	136
/15/03	BOT		7	ABBOTT LABS		43.7000	305
/15/03	BOT		8	ALLSTATE CORP DEL	CO	36.9100	295
/15/03	BOT		1	ADOBE SYS DEL PV$ 0.001		36.8200	36
/15/03	BOT		7	APPLIED MICRO CIRCUITS		4.7290	33
/15/03	BOT		10	AEGON N.V. NY REG SHS		10.1900	101
/15/03	BOT		10	ASML HLDNG NV NY REG SH		9.0500	90
/15/03	BOT		7	ALTRIA GROUP INC		33.4300	234
/15/03	BOT		7	ADECCO SA SPNSRD ADR		9.2600	64
/15/03	BOT		1	ALLIED IRSH BKS SPND AD		31.5000	31
/15/03	BOT		5	AMGEN INC COM PV $0.000		62.1500	310
/15/03	BOT		1	ANHEUSR BUSCH COS INC		51.7200	51
15/03	BOT		29	ARCHER DANIELS MIDLD		11.6000	336
15/03	BOT		10	BURLNGTN N SNTA FE$0.01		28.5300	285
15/03	BOT		8	BECKMAN COULTER INC	CO	39.3900	315
15/03	BOT		5	BARCLAYS PLC	AD	27.4300	137
15/03	BOT		1	BHP BILLITON LTD	AD	10.9900	10
15/03	BOT		19	BAXTER INTERNTL INC		24.3000	461
15/03	BOT		10	BOEING COMPANY		29.8200	298
15/03	BOT		6	CENDANT CORP $0.01		15.5500	93
15/03	BOT		7	CONVERGYS CORP		16.3500	114
15/03	BOT		4	CHEVRONTEXACO CORP		67.2700	269
15/03	BOT		1	COMPANHIA VALE DO RIO		28.2400	28
15/03	BOT		4	CONOCOPHILLIPS		52.0400	208
15/03	BOT		16	CISCO SYSTEMS INC	CO	16.5900	265
15/03	BOT		14	CONAGRA FOODS INC		21.5800	302
15/03	BOT		5	DOUBLECLICK INC DEL	CO	9.9100	49

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
:: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
;/15/03	BOT		27	DEL MONTE FOODS CO	8.3500	225
;/15/03	BOT		10	DELL COMPUTER CORP	32.5500	325
;/15/03	BOT		8	EDISON INTL CALIF	15.4500	123
;/15/03	BOT		14	ENERGY EAST CORP CO	19.2800	269
;/15/03	BOT		1	EBAY INC CO	97.4900	97
./15/03	BOT		7	EXXON MOBIL CORP CO	35.3200	247
./15/03	BOT		12	EARTHLINK INC COM	6.1900	74
/15/03	BOT		4	PPL GROUP INC	61.4900	245
/15/03	BOT		4	FREEPRT-MCMRAN CPR&GLD	19.3000	77
/15/03	BOT		11	FLEETBOSTON FINL CORP	28.8400	317
/15/03	BOT		5	GROUPE DANONE SPON ADR	27.2400	136
/15/03	BOT		6	GAP INC DELAWARE	16.9700	101
/15/03	BOT		14	GENERAL ELECTRIC	28.5800	400
/15/03	BOT		8	HARTFORD FINL SVCS GROU	45.1700	361
/15/03	BOT		16	HEWLETT PACKARD CO DE	17.5500	280
/15/03	BOT		5	HONDA MOTOR ADR NEW	17.1500	85
/15/03	BOT		14	HUNTNGTN BANCSHS INC MD	19.9200	278
/15/03	BOT		5	INTEL CORP	19.7190	98
/15/03	BOT		7	INGERSOLL RAND CO LTD A	43.1400	301
/15/03	BOT		3	INTL BUSINESS MACH	89.5100	268
/15/03	BOT		4	INTL FLAVORS&FRAGRNC	32.7400	130
/15/03	BOT		7	ING GP NV SPSD ADR	16.4300	115
/15/03	BOT		9	JOHNSON AND JOHNSON CO	55.3700	498
/15/03	BOT		18	KNIGHT TRADING GROUP IN	6.0000	108
/15/03	BOT		6	KONINKL PHIL E NY SH NE	18.7000	112
/15/03	BOT		6	KIMBERLY CLARK	50.4500	302
/15/03	BOT		17	LIMITED BRANDS INC	13.8000	234
/15/03	BOT		4	LOWE'S COMPANIES INC	44.1300	176
/15/03	BOT		2	MARTIN MARIETTA MATLS	32.1300	64
/15/03	BOT		3	MCKESSON CORPORATION CO	28.7200	86
/15/03	BOT		12	MILLEA HOLDINGS INC ADR	34.5400	414
/15/03	BOT		10	MARSHALL & ILSLEY CORP	29.8800	298
15/03	BOT		18	MATTEL INC CO	22.4700	404
15/03	BOT		11	MERCK&CO INC	59.3400	652
15/03	BOT		16	MICROSOFT CORP	25.7100	411
15/03	BOT		7	NEXTEL COMMUNICATIONS	13.6200	95
15/03	BOT		8	NOKIA CORP ADR	17.6800	141
15/03	BOT		15	ORACLE CORP $0.01 DE	12.7890	191
15/03	BOT		27	PARAMETRIC TECHNOLOGY C	3.4200	92
15/03	BOT		4	PACTIV CORPORATION	18.9200	75
15/03	BOT		16	J C PENNEY CO COM	17.1300	274
15/03	BOT		10	PFIZER INC DEL PV$0.05	33.4200	334
15/03	BOT		4	PITNEY BOWES INC	35.5400	142
15/03	BOT		5	PROCTER GAMBLE	89.6100	448

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
5/15/03	BOT		4	PROTECTIVE LIFE CORP CO	26.8900	107
5/15/03	BOT		3	QUINTILES TRANSNATL COR	14.2000	42
5/15/03	BOT		4	READERS DIGEST ASSOC IN	12.8200	51
5/15/03	BOT		1	ROYAL DUTCH PETE NY SHS	44.7600	44
5/15/03	BOT		4	RAYTHEON CO DELAWARE NE	31.7900	127
5/15/03	BOT		20	SPRINT CORP PCS COM SR	3.6000	72
5/15/03	BOT		13	SBC COMMUNICTNS INC PV$	24.7700	322
5/15/03	BOT		5	SARA LEE CORP CO	17.5000	87
5/15/03	BOT		4	SMURFIT-STONE CONTAINER	14.8400	59
5/15/03	BOT		4	SOVEREIGN BANCRP INC CO	15.2800	61
5/15/03	BOT		8	STAPLES INC	20.0000	160
5/15/03	BOT		8	TECH DATA CORP	24.0600	192
/15/03	BOT		5	TPG N V ADR	16.7100	83
/15/03	BOT		12	TAIWAN S MANUFCTRING AD	9.0400	108
/15/03	BOT		20	TIBCO SOFTWARE INC	5.0900	101
/15/03	BOT		5	UPM KYMMENE OY SPSD AD	14.6300	73
/15/03	BOT		4	UNION PACIFIC CORP	60.1100	240
/15/03	BOT		34	VIGNETTE CORP	2.2500	76
/15/03	BOT		7	VERIZON COMMUNICATNS CO	37.4700	262
/15/03	BOT		8	VODAFONE GRP PLC SPN AD	20.4900	163
/15/03	BOT		7	WASHINGTON MUTUAL INC	39.2400	274
/15/03	BOT		5	WAL MART STORES INC	53.7800	268
/15/03	BOT		5	WEYERHAEUSER CO	50.1300	250
/15/03	BOT		29	XEROX CORP	10.4400	302
/15/03	BOT		6	YAHOO INC CAL PV$0.0001	27.3000	163
/15/03	BOT		8	WACHOVIA CORP NEW	39.7100	317
/15/03	BOT		6	WYETH	44.4900	266
/07/03	SLD		8C	ABBOTT LABS	42.7900	342C
/07/03	SLD		10C	ALLSTATE CORP DEL CO	36.9000	368C
/07/03	SLD		10C	APPLIED MICRO CIRCUITS	4.9110	49C
/07/03	SLD		9C	AEGON N.V. NY REG SHS	10.2700	92C
/07/03	SLD		9C	ASML HLDNG NV NY REG SH	9.3000	83C
/07/03	SLD		8C	ALTRIA GROUP INC	31.4400	251C
/07/03	SLD		10C	ADECCO SA SPNSRD ADR	9.6400	96C
/07/03	SLD		5C	ALLIED IRSH BKS SPND AD	32.2600	161C
/07/03	SLD		5C	AMGEN INC COM PV $0.000	59.4500	297C
/07/03	SLD		26C	ARCHER DANIELS MIDLD	10.8500	282C
/07/03	SLD		10C	BANCO B VIZ ARGT SA ADR	9.6100	96C
/07/03	SLD		16C	BANCO SANT CTL HISP ADR	7.8300	125C
/07/03	SLD		12C	BURLNGTN N SNTA FE$0.01	27.9500	335C
/07/03	SLD		9C	BECKMAN COULTER INC CO	39.8400	358C
/07/03	SLD		5C	BARCLAYS PLC AD	27.5700	137C
/07/03	SLD		11C	BOEING COMPANY	28.4600	313C
/07/03	SLD		10C	CENDANT CORP $0.01	14.9600	149C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
5/07/03	SLD		9C	CONVERGYS CORP	16.3200	146C
5/07/03	SLD		5C	CHEVRONTEXACO CORP	66.5900	332C
5/07/03	SLD		6C	CONOCOPHILLIPS	51.9000	311C
5/07/03	SLD		18C	CISCO SYSTEMS INC CO	15.5500	279C
5/07/03	SLD		7C	COMPUTER ASSOC INTL INC	17.0100	119C
5/07/03	SLD		9C	CONAGRA FOODS INC	21.7200	195C
5/07/03	SLD		7C	DOUBLECLICK INC DEL CO	8.9300	62C
5/07/03	SLD		11C	DELL COMPUTER CORP	30.7400	338C
5/07/03	SLD		9C	EDISON INTL CALIF	14.9100	134C
5/07/03	SLD		16C	ENERGY EAST CORP CO	18.3900	294C
5/07/03	SLD		8C	EXXON MOBIL CORP CO	35.4000	283C
5/07/03	SLD		14C	EARTHLINK INC COM	6.0800	85C
5/07/03	SLD		5C	FPL GROUP INC	59.7300	298C
5/07/03	SLD		5C	FREEPRT-MCMRAN CPR&GLD	17.8900	89C
5/07/03	SLD		12C	FLEETBOSTON FINL CORP	28.1200	337C
5/07/03	SLD		5C	GROUPE DANONE SPON ADR	27.2000	135C
5/07/03	SLD		6C	GAP INC DELAWARE	16.4900	98C
5/07/03	SLD		16C	GENERAL ELECTRIC	28.8300	461C
5/07/03	SLD		9C	HARTFORD FINL SVCS GROU	44.8800	403C
5/07/03	SLD		18C	HEWLETT PACKARD CO DE	17.1900	309C
5/07/03	SLD		6C	HONDA MOTOR ADR NEW	17.5200	105C
5/07/03	SLD		16C	HUNTNGTN BANCSHS INC MD	19.6600	314C
5/07/03	SLD		6C	INTEL CORP	19.1810	115C
5/07/03	SLD		7C	INGERSOLL RAND CO LTD A	43.7600	306C
5/07/03	SLD		6C	INTL BUSINESS MACH	86.7700	520C
5/07/03	SLD		5C	INTL FLAVORS&FRAGRNC	31.8000	158C
5/07/03	SLD		7C	ING GP NV SPSD ADR	17.1300	119C
5/07/03	SLD		9C	JOHNSON AND JOHNSON CO	56.8100	511C
5/07/03	SLD		30C	KNIGHT TRADING GROUP IN	5.6000	167C
5/07/03	SLD		9C	KONINKL PHIL E NY SH NE	19.3200	173C
5/07/03	SLD		7C	KIMBERLY CLARK	50.5300	353C
5/07/03	SLD		5C	LOWE'S COMPANIES INC	44.7400	223C
5/07/03	SLD		5C	MCKESSON CORPORATION CO	28.5200	142C
5/07/03	SLD		12C	MARSHALL & ILSLEY CORP	29.7000	356C
5/07/03	SLD		37C	MATTEL INC CO	22.2000	821C
5/07/03	SLD		16C	MERCK&CO INC	58.5000	935C
5/07/03	SLD		36C	MICROSOFT CORP	26.0100	936C
5/07/03	SLD		7C	NEXTEL COMMUNICATIONS	13.7100	95C
5/07/03	SLD		12C	NOKIA CORP ADR	17.0600	204C
5/07/03	SLD		18C	ORACLE CORP $0.01 DE	12.2010	219C
5/07/03	SLD		43C	PARAMETRIC TECHNOLOGY C	3.3400	143C
5/07/03	SLD		5C	PACTIV CORPORATION	19.7700	98C
5/07/03	SLD		25C	J C PENNEY CO COM	17.5300	438C
5/07/03	SLD		10C	PFIZER INC DEL PV$0.05	31.7900	317C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
T: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
5/07/03	SLD		5C	PITNEY BOWES INC	35.3000	176C
5/07/03	SLD		5C	PROCTER GAMBLE	89.7800	448C
5/07/03	SLD		5C	PROTECTIVE LIFE CORP CO	27.9400	139C
5/07/03	SLD		5C	QUINTILES TRANSNATL COR	14.0800	70C
5/07/03	SLD		7C	READERS DIGEST ASSOC IN	12.1800	85C
5/07/03	SLD		5C	RAYTHEON CO DELAWARE NE	30.0800	150C
5/07/03	SLD		23C	SPRINT CORP PCS COM SR	3.8300	88C
5/07/03	SLD		14C	SBC COMMUNICTNS INC PV$	23.2200	325C
5/07/03	SLD		6C	SARA LEE CORP CO	17.4000	104C
5/07/03	SLD		5C	SMURFIT-STONE CONTAINER	14.2600	71C
5/07/03	SLD		6C	SOVEREIGN BANCRP INC CO	15.3300	91C
5/07/03	SLD		9C	STAPLES INC	20.3500	183C
5/07/03	SLD		9C	SYMBOL TECHNOLOGIES DEL	11.5400	103C
5/07/03	SLD		4C	TECH DATA CORP	24.2700	97C
5/07/03	SLD		4C	TPG N V ADR	16.5100	66C
5/07/03	SLD		16C	TAIWAN S MANUFCTRING AD	8.4900	135C
5/07/03	SLD		9C	TIBCO SOFTWARE INC	5.0000	44C
5/07/03	SLD		4C	UPM KYMMENE OY SPSD AD	15.4000	61C
5/07/03	SLD		5C	UNION PACIFIC CORP	60.0000	299C
/07/03	SLD		49C	VIGNETTE CORP	2.2100	108C
/07/03	SLD		8C	VERIZON COMMUNICATNS CO	37.5800	300C
/07/03	SLD		8C	VODAFONE GRP PLC SPN AD	19.1200	152C
/07/03	SLD		8C	WASHINGTON MUTUAL INC	40.1300	321C
/07/03	SLD		6C	WAL MART STORES INC	55.0900	330C
/07/03	SLD		6C	WEYERHAEUSER CO	48.9800	293C
/07/03	SLD		32C	XEROX CORP	10.2000	326C
/07/03	SLD		6C	YAHOO INC CAL PV$0.0001	24.8300	148C
/07/03	SLD		9C	WACHOVIA CORP NEW	39.5500	355C
/07/03	SLD		8C	WYETH	42.8000	342C
/06/03	SLD		3C	CANON INC ADR REPSSH	42.3126	126C
/06/03	SLD		14C	NEWELL RUBBERMAID INC	29.5531	413C
/06/03	SLD		23C	SYSCO CORPORATION	28.8403	663C
/05/03	BOT		12	GUIDANT CORP	38.4680	461
/05/03	BOT		11	ST JUDE MEDICAL INC	52.2161	574
/05/03	SLD		23C	SYSCO CORPORATION	28.8043	662C
/05/03	CXLS		23	SYSCO CORPORATION	28.8043	662
/30/03	BOT		8	DEUTSCHE BANK AG REG	51.9484	415
/30/03	SLD		16C	UNTD OVERSEAS BK SPN AD	11.5652	185C
/29/03	BOT		6	NATIONAL GRID TRNSCO AD	32.9000	197
/24/03	BOT		18	AEGON N.V. NY REG SHS	10.3950	187
/24/03	BOT		35	ADECCO SA SPNSRD ADR	9.6473	337
/24/03	SLD		19C	BHP BILLITON LTD AD	11.0055	209C
/24/03	SLD		12C	HUTCHISN WHAMPOA ADR	26.6428	319C
/24/03	SLD		3C	RIO TINTO PLC SPNSRD AD	73.2400	219C

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FINANCIAL CONSULTANTS
SECURITY ACTIVITY
MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/24/03	SLD		14C	SONY CORP ADR NEW	27.7117	387C
/23/03	BOT		5	ING GP NV SPSD ADR	16.6080	83
/23/03	BOT		2	UBS AG NEW	49.1560	98
/22/03	BOT		30	AEGON N.V. NY REG SHS	10.4189	312
/22/03	BOT		5	DIAGEO PLC SPSD ADR NEW	43.4796	217
/22/03	BOT		26	ING GP NV SPSD ADR	15.8158	411
/22/03	SLD		5C	NATL AUSTRALIA B SPN AD	100.5233	502C
/22/03	SLD		3C	OUTBACK STEAKHOUSE INC	36.6427	109C
/22/03	SLD		15C	SYMBOL TECHNOLOGIES DEL	11.5221	172C
/21/03	BOT		16	EARTHLINK INC COM	5.8054	92
/16/03	SLD		42C	MATSUSHTA EL IND AD	7.8711	330C
/07/03	BOT		13	ADOBE SYS DEL PV$ 0.001	33.7336	438
/07/03	SLD		7C	ANHEUSR BUSCH COS INC	48.3200	338C
/07/03	BOT		6	FIRST DATA CORPORATION	34.8500	209
/07/03	SLD		11C	INTUIT INC CO	38.9094	427C
/04/03	SLD		6C	AVENTIS SPON AD	46.0724	276C
/04/03	BOT		8	CSX CORP	29.6754	237
/04/03	BOT		4	GLAXOSMITHKLINE PLC AD	37.4281	149
/04/03	BOT		2	NUCOR CORPORATION	39.4758	78
/04/03	BOT		11	SHIRE PHARMECEU GP ADR	19.4312	213
/04/03	SLD		5C	SMURFIT-STONE CONTAINER	13.7300	68C
/04/03	BOT		7	VODAFONE GRP PLC SPN AD	19.0034	133
/03/03	BOT		2,000	GOLDMAN SACHS GROUP INC	102.8520	2,076
/03/03	SLD		8C	COMPUTER ASSOC INTL INC	14.6486	117C
/03/03	BOT		2	COMPUTER SCIENCE CRP	30.3475	60
/03/03	BOT		4	MEDICIS PHARMS CL A COM	55.4028	221
/03/03	BOT		4	TECH DATA CORP	24.1478	96
/02/03	BOT		2,000	WELLS FARGO COMPANY	100.8580	2,018
/31/03	SLD		3,000C	KRAFT FOODS INC	101.6460	3,102C
/31/03	SLD		4C	BALL CORP CO	55.7755	223C
/31/03	BOT		17	BIOMET INC CO	30.8165	523
/31/03	SLD		11C	DELUXE CORPORATION	40.2373	442C
/31/03	SLD		3C	EBAY INC CO	85.9100	257C
/31/03	SLD		22C	FAMILY DOLLAR STORES	30.9574	681C
/31/03	SLD		19C	HEWLETT PACKARD CO DE	16.3000	309C
/31/03	BOT		24	PACTIV CORPORATION	20.1978	484
/31/03	BOT		13	SYMANTEC CORP CO	39.3002	510
/31/03	DIV		12	UPM KYMMENE OY SPSD AD	.0000	0
/31/03	DUDB		12C	UPM KYMMENE OY SPSD AD	.0000	0
28/03	BOT		6	ABBOTT LABS	38.2072	229
28/03	SLD		1C	BURLNGTN N SNTA FE$0.01	25.3151	25C
28/03	BOT		9	BECKMAN COULTER INC CO	33.8211	304
28/03	BOT		18	BOEING COMPANY	26.1196	470
28/03	SLD		4C	BURLINGTON RESOURCES IN	47.7200	190C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/28/03	SLD		2C	COMPASS BANCSHARES INC	31.5000	62C
/28/03	BOT		2	CHEVRONTEXACO CORP	65.3858	130
/28/03	SLD		2C	CONOCOPHILLIPS	53.5031	107C
/28/03	SLD		4C	CHARTER ONE FINL INC CO	28.0165	112C
/28/03	SLD		1C	CONAGRA FOODS INC	19.2119	19C
/28/03	BOT		2	ENERGY EAST CORP CO	18.1199	36
/28/03	SLD		2C	EXXON MOBIL CORP CO	35.9600	71C
/28/03	SLD		4C	FPL GROUP INC	58.7412	234C
/28/03	SLD		6C	FLEETBOSTON FINL CORP	24.2000	145C
/28/03	BOT		14	HARTFORD FINL SVCS GROU	36.0733	505
/28/03	SLD		19C	HEWLETT PACKARD CO DE	16.3000	309C
/28/03	SLD		19C	HEWLETT PACKARD CO DE	16.3000	309C
/28/03	CXLS		19	HEWLETT PACKARD CO DE	16.3000	309
/28/03	CXLS		19	HEWLETT PACKARD CO DE	16.3000	309
/28/03	SLD		9C	HUNTNGTN BANCSHS INC MD	18.6500	167C
/28/03	BOT		3	INGERSOLL RAND CO LTD A	38.8146	116
/28/03	BOT		6	JANUS CAPITAL GROUP INC	11.7717	70
/28/03	BOT		4	KIMBERLY CLARK	45.5098	182
/28/03	BOT		1	KNIGHT RIDDER INC	59.4089	59
/28/03	BOT		1	NORTHROP GRUMMAN CORP	86.9357	86
/28/03	SLD		3C	OUTBACK STEAKHOUSE INC	35.5721	106C
/28/03	BOT		18	SBC COMMUNICTNS INC PV$	20.5000	369
/28/03	SLD		3C	SUNOCO INC PV$1 PA	36.7358	110C
/28/03	SLD		3C	UNION PACIFIC CORP	55.9200	167C
/28/03	SLD		6C	WASHINGTON MUTUAL INC	35.5799	213C
/28/03	BOT		2	WEYERHAEUSER CO	47.5431	95
/28/03	SLD		15C	XEROX CORP	8.7764	131C
/28/03	SLD		4C	WACHOVIA CORP NEW	34.4341	137C
/28/03	BOT		11	WYETH	37.8057	415
/26/03	DUDB		12	UPM KYMMENE OY SPSD AD	.0000	0
/24/03	SLD		14C	MAYTAG CORP	19.7865	277C
/24/03	BOT		9	PFIZER INC DEL PV$0.05	31.3487	282
/24/03	BOT		38	SHARP CORP ADR	10.7546	408
/21/03	SLD		9C	AMERSHAM PLC AD	31.0489	279C
/20/03	BOT		13,000	FNMA P555375 05 50%2018	104.6875	13,643
/20/03	SLD		18C	TRIZEC PPTYS INC	8.3624	150C
/14/03	BOT		8	KONINKL PHIL E NY SH NE	16.3734	130
/14/03	BOT		8	NOKIA CORP ADR	14.3100	114
/14/03	BOT		7	TAIWAN S MANUFCTRING AD	7.8923	55
/13/03	RDP		26,000C	U.S. TREASURY BILL	.0000	26,000C
/12/03	BOT		13,000	FNMA P254694 06%2033	104.3125	13,586
11/03	BOT		1,000	SBC COMMUNICATIONS INC	109.9230	1,103
11/03	BOT		13,000	FNMA 06003V 06%	.0000	0
11/03	CXLB		13,000C	FNMA 06003V 06%	.0000	0

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/11/03	BOT		13,000	FNMA FF055V 05 50%	.0000	0
/11/03	CXLB		13,000C	FNMA FF055V 05 50%	.0000	0
/11/03	BOT		26	HONDA MOTOR ADR NEW	16.8182	437
/11/03	SLD		14C	MILLEA HOLDINGS INC ADR	30.2909	424C
/10/03	BOT		1,000	SBC COMMUNICATIONS INC	109.3940	1,098
/10/03	CXLB		1,000C	SBC COMMUNICATIONS INC	109.3940	1,098C
/10/03	BOT		1,000	NM AMER GENL FIN CORP B	105.5140	1,079
/10/03	BOT		37	CISCO SYSTEMS INC CO	13.0861	484
/10/03	SLD		9C	SMURFIT-STONE CONTAINER	12.4172	111C
/10/03	SLD		28C	TJX COS INC NEW	16.3813	458C
/07/03	SLD		2,000C	CITIGROUP INC	118.3880	2,432C
/07/03	BOT		18	EARTHLINK INC COM	5.0487	90
/07/03	SLD		21C	SYMBOL TECHNOLOGIES DEL	10.1121	212C
/06/03	SLD		8C	BANK HAWAII CORP	30.8380	246C
/06/03	BOT		7	CONVERGYS CORP	11.8956	83
/06/03	BOT		2	COMPUTER SCIENCE CRP	29.5475	59
/06/03	BOT		16	KNIGHT TRADING GROUP IN	4.6869	74
/06/03	BOT		4	MARTIN MARIETTA MATLS	26.8791	107
/06/03	BOT		12	MASCO CORP	17.5852	211
/06/03	BOT		37	PARAMETRIC TECHNOLOGY C	2.2197	82
/06/03	BOT		5	SOVEREIGN BANCRP INC CO	13.7180	68
/28/03	BOT	N	3,000	BANK OF AMERICA CORP	108.6156	3,273
/28/03	BOT	N	3,000	HONEYWELL INTERNATIONAL	111.6244	3,435
/28/03	BOT	N	3,000	FORD MOTOR CREDIT	103.1390	3,121
/28/03	BOT	N	2,000	CITIGROUP INC	118.1103	2,424
/28/03	BOT	N	3,000	COUNTRYWIDE HOME LOAN	107.9927	3,255
/28/03	BOT	N	3,000	KRAFT FOODS INC	108.5152	3,296
/28/03	BOT	N	3,000	WAL-MART STORES	109.7080	3,306
/28/03	BOT	N	5,000	FED NAT'L MORTGAGE ASSO	116.2500	5,939
/28/03	BOT	N	6,000	FEDERAL HOME LN MTG COR	107.9531	6,518
/28/03	BOT	N	26,000	U.S. TREASURY BILL	99.9676	25,991
/28/03	BOT	N	4,000	U.S. TREASURY NOTE	116.7187	4,747
/28/03	BOT	N	5,000	U.S. TREASURY NOTE	108.0312	5,470
/28/03	SLD		2C	ABBOTT LABS	35.8600	71C
/28/03	SLD		2C	ALLSTATE CORP DEL CO	31.8600	63C
/28/03	SLD		1C	AMER EAGLE OUTFITTERS	14.5500	14C
/28/03	SLD		2C	APPLIED MICRO CIRCUITS	3.5010	6C
/28/03	SLD		1C	APOLLO GROUP INC CL A	45.9000	45C
/28/03	SLD		3C	ASML HLDNG NV NY REG SH	7.2400	21C
28/03	SLD		2C	ALTRIA GROUP INC	39.0900	78C
28/03	SLD		1C	AMERSHAM PLC AD	34.3000	34C
28/03	SLD		1C	ALLIED IRSH BKS SPND AD	25.0000	24C
28/03	SLD		1C	ACE LTD	27.7700	27C
28/03	SLD		1C	AMGEN INC COM PV $0.000	54.4700	54C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/28/03	SLD		1C	ANHEUSR BUSCH COS INC	47.1700	47C
/28/03	SLD		8C	ARCHER DANIELS MIDLD	10.7900	86C
/28/03	SLD		2C	BANCO B VIZ ARGT SA ADR	8.4700	16C
/28/03	SLD		4C	BANCO SANT CTL HISP ADR	6.4200	25C
/28/03	SLD		1C	BALL CORP CO	52.9100	52C
/28/03	SLD		3C	BURLNGTN N SNTA FE$0.01	25.2600	75C
/28/03	SLD		2C	BECKMAN COULTER INC CO	32.8600	65C
/28/03	SLD		1C	BARCLAYS PLC AD	23.2500	23C
/28/03	SLD		1C	BP PLC SPON AD	38.1300	38C
/28/03	SLD		1C	BASF AG SPONSORED AD	36.8600	36C
/28/03	SLD		1C	BANKNORTH GROUP MAIN	22.5900	22C
/28/03	SLD		2C	BHP BILLITON LTD AD	11.2300	22C
/28/03	SLD		1C	BAXTER INTERNTL INC	28.3000	28C
/28/03	SLD		1C	BAXTER INTERNTL INC	28.3000	28C
/28/03	SLD		1C	BECTON DICKINSON CO	34.3900	34C
/28/03	SLD		1C	BLOCK H&R INC	40.5700	40C
/28/03	SLD		2C	BOEING COMPANY	27.8000	55C
/28/03	SLD		1C	BOSTON SCIENTIFIC CORP	43.9500	43C
/28/03	SLD		1C	BBD BATH & BEYOND INC	33.4900	33C
/28/03	SLD		1C	COMPASS BANCSHARES INC	32.0100	32C
/28/03	SLD		1C	CNF INC DEL CO	28.9900	28C
/28/03	SLD		1C	CENDANT CORP $0.01	12.3800	12C
/28/03	SLD		2C	CONVERGYS CORP	12.3400	24C
/28/03	SLD		1C	CANON INC ADR REP5SH	36.0100	36C
/28/03	SLD		1C	CHEVRONTEXACO CORP	64.3900	64C
/28/03	SLD		1C	COMPANHIA VALE DO RIO	28.5900	28C
/28/03	SLD		2C	CONOCOPHILLIPS	51.0900	102C
/28/03	SLD		1C	CHARTER ONE FINL INC CO	28.9500	28C
/28/03	SLD		1C	CISCO SYSTEMS INC CO	14.0300	14C
/28/03	SLD		1C	CISCO SYSTEMS INC CO	14.0300	14C
/28/03	SLD		1C	CISCO SYSTEMS INC CO	14.0300	14C
/28/03	SLD		1C	CLOROX CO DEL COM	42.5400	42C
/28/03	SLD		1C	COCA COLA COM	40.4900	40C
/28/03	SLD		2C	COMPUTER ASSOC INTL INC	13.2000	26C
/28/03	SLD		3C	CONAGRA FOODS INC	23.1800	69C
/28/03	SLD		1C	DIAMOND OFFSHORE DRLNG	21.8500	21C
/28/03	SLD		2C	DOUBLECLICK INC DEL CO	6.4100	12C
/28/03	SLD		1C	DELL COMPUTER CORP	27.0000	26C
/28/03	SLD		1C	DELL COMPUTER CORP	27.0000	26C
/28/03	SLD		1C	DELL COMPUTER CORP	27.0000	26C
/28/03	SLD		1C	DELUXE CORPORATION	40.2000	40C
/28/03	SLD		2C	EDISON INTL CALIF	12.5400	25C
/28/03	SLD		4C	ENERGY EAST CORP CO	18.8700	75C
/28/03	SLD		1C	EBAY INC CO	78.4700	78C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/28/03	SLD		2C	EXXON MOBIL CORP CO	34.3400	68C
/28/03	SLD		2C	EARTHLINK INC COM	5.0500	10C
/28/03	SLD		1C	ECOLAB INC	49.0800	49C
/28/03	SLD		1C	ELECTRONIC ARTS INC DE	53.0000	52C
/28/03	SLD		1C	FPL GROUP INC	56.2700	56C
/28/03	SLD		1C	FAMILY DOLLAR STORES	28.4300	28C
/28/03	SLD		1C	FREEPRT-MCMRAN CPR&GLD	17.0700	17C
/28/03	SLD		1C	FANNIE MAE (USA) COM NP	64.5500	64C
/28/03	SLD		3C	FLEETBOSTON FINL CORP	24.8000	74C
/28/03	SLD		1C	FOREST LABS INC	49.9600	49C
/28/03	SLD		1C	GROUPE DANONE SPON ADR	23.8400	23C
/28/03	SLD		2C	GAP INC DELAWARE	13.4300	26C
/28/03	SLD		1C	GLAXOSMITHKLINE PLC AD	35.1400	35C
/28/03	SLD		4C	GENERAL ELECTRIC	24.1500	96C
/28/03	SLD		1C	GENERAL MILLS	43.2600	43C
/28/03	SLD		1C	HARTE-HANKS INC DEL $1	18.3700	18C
/28/03	SLD		1C	HARTFORD FINL SVCS GROU	36.1500	36C
/28/03	SLD		1C	HSBC HLDG PLC SPNADR NE	53.8000	53C
/28/03	SLD		5C	HEWLETT PACKARD CO DE	16.0100	80C
/28/03	SLD		5C	HUNTNGTN BANCSHS INC MD	19.3200	96C
/28/03	SLD		1C	HUTCHISN WHAMPOA ADR	30.0000	29C
/28/03	SLD		1C	INTEL CORP	17.1510	17C
/28/03	SLD		1C	INTEL CORP	17.1510	17C
/28/03	SLD		2C	INGERSOLL RAND CO LTD A	39.5300	79C
/28/03	SLD		1C	INTL BUSINESS MACH	78.3000	78C
/28/03	SLD		1C	INTL FLAVORS&FRAGRNC	31.5700	31C
/28/03	SLD		1C	INTUIT INC CO	47.3000	47C
/28/03	SLD		1C	JANUS CAPITAL GROUP INC	11.8300	11C
/28/03	SLD		2C	JOHNSON AND JOHNSON CO	52.8300	105C
/28/03	SLD		1C	JOHNSON AND JOHNSON CO	52.8300	52C
/28/03	SLD		1C	KING PHARMACEUTICALS IN	16.6600	16C
/28/03	SLD		5C	KNIGHT TRADING GROUP IN	4.8200	24C
/28/03	SLD		1C	KONINKL PHIL E NY SH NE	16.6700	16C
/28/03	SLD		1C	KIMBERLY CLARK	46.2200	46C
/28/03	SLD		1C	LEXMARK INTL INC CL A	62.1500	62C
/28/03	SLD		5C	LIMITED BRANDS INC	11.8200	59C
/28/03	SLD		1C	LOWE'S COMPANIES INC	39.3300	39C
/28/03	SLD		1C	MERCURY INTERACTIVE COR	32.5700	32C
/28/03	SLD		1C	MITSUBISHI CP SPNSRD AD	10.3000	10C
/28/03	SLD		1C	MILLENNIUM PHARMS INC	7.1500	7C
/28/03	SLD		1C	MCKESSON CORPORATION CO	26.7800	26C
/28/03	SLD		1C	MILLEA HOLDINGS INC ADR	34.6300	34C
28/03	SLD		3C	MARSHALL & ILSLEY CORP	26.6500	79C
28/03	SLD		6C	MATTEL INC CO	21.3000	127C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/28/03	SLD		1C	MATSUSHTA EL IND AD	9.0100	9C
/28/03	SLD		1C	MATSUSHTA EL IND AD	9.0100	9C
/28/03	SLD		1C	MAYTAG CORP	24.4400	24C
/28/03	SLD		4C	MERCK&CO INC	53.0000	211C
/28/03	SLD		4C	MICROSOFT CORP	23.9100	95C
/28/03	SLD		1C	MICROSOFT CORP	23.9100	23C
/28/03	SLD		1C	MICROSOFT CORP	23.9100	23C
/28/03	SLD		1C	MICROSOFT CORP	23.9100	23C
/28/03	SLD		2C	NEXTEL COMMUNICATIONS	14.0900	28C
/28/03	SLD		1C	NOVARTIS ADR	36.5800	36C
/28/03	SLD		1C	NEWELL RUBBERMAID INC	28.6000	28C
/28/03	SLD		1C	NTT DOCOMO INC SPD AD	18.8000	18C
/28/03	SLD		1C	NOBLE ENERGY INC	35.5500	35C
/28/03	SLD		1C	NESTLE S A REP RG SH AD	50.0500	50C
/28/03	SLD		2C	NOKIA CORP ADR	13.3400	26C
/28/03	SLD		4C	ORACLE CORP $0.01 DE	12.0610	48C
/28/03	SLD		1C	OUTBACK STEAKHOUSE INC	32.5000	32C
/28/03	SLD		7C	PARAMETRIC TECHNOLOGY C	2.2900	16C
/28/03	SLD		5C	J C PENNEY CO COM	20.0800	100C
/28/03	SLD		1C	PFIZER INC DEL PV$0.05	29.8000	29C
/28/03	SLD		1C	PFIZER INC DEL PV$0.05	29.8000	29C
/28/03	SLD		1C	PFIZER INC DEL PV$0.05	29.8000	29C
/28/03	SLD		1C	PITNEY BOWES INC	31.3400	31C
/28/03	SLD		1C	PROCTER GAMBLE	82.3700	82C
/28/03	SLD		1C	PROTECTIVE LIFE CORP CO	27.2000	27C
/28/03	SLD		1C	QUALCOMM INC	35.2000	35C
/28/03	SLD		1C	QLOGIC CORP	34.6800	34C
/28/03	SLD		1C	QUINTILES TRANSNATL COR	12.5100	12C
/28/03	SLD		1C	REED ELSEVIER PLC SP AD	29.3600	29C
/28/03	SLD		1C	READERS DIGEST ASSOC IN	10.8300	10C
/28/03	SLD		1C	ROYAL DUTCH PETE EUR.56	39.5900	39C
/28/03	SLD		1C	RAYTHEON CO DELAWARE NE	27.1700	27C
/28/03	SLD		5C	SPRINT CORP PCS COM SR	4.0100	20C
/28/03	SLD		1C	SBC COMMUNICTNS INC PV$	21.0900	21C
/28/03	SLD		1C	SBC COMMUNICTNS INC PV$	21.0900	21C
/28/03	SLD		2C	SARA LEE CORP CO	19.8600	39C
/28/03	SLD		1C	SUNOCO INC PV$1 PA	35.2800	35C
/28/03	SLD		2C	SMURFIT-STONE CONTAINER	13.2000	26C
/28/03	SLD		1C	SMITHFILDS FOODS PV$0.5	18.6400	18C
/28/03	SLD		1C	SONY CORP ADR NEW	37.8900	37C
/28/03	SLD		1C	SOVEREIGN BANCRP INC CO	13.7100	13C
/28/03	SLD		2C	STAPLES INC	17.2600	34C
/28/03	SLD		1C	SUNGARD DATA SYS INC	19.6600	19C
/28/03	SLD		4C	SYMBOL TECHNOLOGIES DEL	10.3300	41C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/28/03	SLD		1C	SYSCO CORPORATION	27.4800	27C
/28/03	SLD		1C	TJX COS INC NEW	16.1600	16C
/28/03	SLD		1C	TECH DATA CORP	22.6300	22C
/28/03	SLD		1C	TPG N V ADR	13.9600	13C
/28/03	SLD		3C	TAIWAN S MANUFCTRING AD	7.1400	21C
/28/03	SLD		1C	TRIZEC PPTYS INC	8.6700	8C
/28/03	SLD		2C	TIBCO SOFTWARE INC	4.7600	9C
/28/03	SLD		1C	TOYOTA MOTOR CORP ADR	47.4700	47C
/28/03	SLD		1C	UPM KYMMENE OY SPSD AD	28.8300	28C
/28/03	SLD		1C	UNITEDHEALTH GROUP INC	83.0000	82C
/28/03	SLD		1C	UNION PACIFIC CORP	55.8500	55C
/28/03	SLD		1C	UNTD OVERSEAS BK SPN AD	11.9000	11C
/28/03	SLD		10C	VIGNETTE CORP	1.5300	15C
/28/03	SLD		2C	VERIZON COMMUNICATNS CO	35.0700	70C
/28/03	SLD		1C	VODAFONE GRP PLC SPN AD	18.1000	18C
/28/03	SLD		1C	VERTEX PHARMCTLS INC	11.1700	11C
/28/03	SLD		1C	VALASSIS COMMUNCN INC	23.0200	23C
/28/03	SLD		2C	WASHINGTON MUTUAL INC	34.6200	69C
/28/03	SLD		2C	WAL MART STORES INC	48.4200	96C
/28/03	SLD		1C	WEYERHAEUSER CO	49.9800	49C
/28/03	SLD		9C	XEROX CORP	8.9100	80C
/28/03	SLD		2C	YAHOO INC CAL PV$0.0001	20.8000	41C
/28/03	SLD		1C	WACHOVIA CORP NEW	35.7100	35C
/28/03	SLD		1C	WACHOVIA CORP NEW	35.7100	35C
/28/03	SLD		1C	WACHOVIA CORP NEW	35.7100	35C
/28/03	SLD		1C	WYETH	35.1900	35C
/25/03	SLD		13C	CADBURY SCHWEPPES ADR	19.8258	257C
/25/03	BOT		23	MATSUSHTA EL IND AD	9.5749	220
/21/03	SLD		14,000C	FNMA P254637 05 50%2033	101.9062	14,280C
/21/03	DIV		20	MICROSOFT CORP	.0000	0
/21/03	DUDB		20C	MICROSOFT CORP	.0000	0
/20/03	SLD	N	3,000C	GENERAL MOTOR ACCEP COR	103.0709	3,103C
/20/03	SLD	N	2,000C	HOUSEHOLD FINANCE	106.5829	2,177C
/20/03	SLD	N	3,000C	VERIZON GLOBAL FDG CORP	114.3286	3,480C
/20/03	SLD	N	3,000C	NM GENL ELEC CAP CORP B	102.9789	3,116C
/20/03	SLD	N	3,000C	FEDERAL NATL MTGE ASSN	109.1727	3,290C
/19/03	SLD	N	3,000C	U.S. TRSY INFLATION NOT	108.8750	3,297C
/19/03	BOT		31	ABBOTT LABS	36.0900	1,118
/19/03	BOT		45	ALLSTATE CORP DEL CO	31.4700	1,416
/19/03	BOT		13	AMER EAGLE OUTFITTERS	15.5100	201
/19/03	BOT		43	APPLIED MICRO CIRCUITS	3.4390	147
/19/03	BOT		13	APOLLO GROUP INC CL A	44.7100	581
/19/03	BOT		50	ASML HLDNG NV NY REG SH	7.7000	385
/19/03	SLD		45C	AIR PRODUCTS&CHEM	39.2500	1,766C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/19/03	BOT		40	ALTRIA GROUP INC	37.4900	1,499
/19/03	BOT		6	AVENTIS SPON AD	46.7600	280
/19/03	BOT		10	AMERSHAM PLC AD	39.3100	393
/19/03	BOT		23	ALLIED IRSH BKS SPND AD	26.6000	611
/19/03	BOT		12	ACE LTD	27.9800	335
/19/03	SLD		20C	AMER INTL GROUP INC	50.3500	1,006C
/19/03	BOT		23	AMGEN INC COM PV $0.000	53.6700	1,234
/19/03	BOT		17	ANHEUSR BUSCH COS INC	47.9500	815
/19/03	SLD		25C	APPLIED MATERIAL INC	12.3910	309C
/19/03	BOT		152	ARCHER DANIELS MIDLD	11.4300	1,737
/19/03	BOT		9	AUTOZONE INC NEVADA CO	65.1200	586
/19/03	BOT		47	BANCO B VIZ ARGT SA ADR	8.5300	400
/19/03	BOT		8	BANK HAWAII CORP	30.1800	241
/19/03	SLD		23C	BAKER HUGHES INC	30.0400	690C
/19/03	BOT		84	BANCO SANT CTL HISP ADR	6.3300	531
/19/03	BOT		14	BALL CORP CO	53.3200	746
/19/03	BOT		9	BJ SERVICES CO	32.1700	289
/19/03	BOT		57	BURLNGTN N SNTA FE$0.01	25.3400	1,444
/19/03	SLD		30C	BANK OF N Y CO INC	22.9700	689C
/19/03	BOT		33	BECKMAN COULTER INC CO	32.1100	1,059
/19/03	BOT		23	BARCLAYS PLC AD	24.7500	569
/19/03	BOT		12	BARD C R INC	55.9600	671
/19/03	BOT		12	BP PLC SPON AD	38.3100	459
/19/03	BOT		12	BASF AG SPONSORED AD	36.4700	437
/19/03	BOT		16	BANKNORTH GROUP MAIN	22.8200	365
/19/03	BOT		8	BAUSCH LOMB INC	31.1800	249
/19/03	BOT		44	BHP BILLITON LTD AD	11.1000	488
/19/03	BOT		26	BAXTER INTERNTL INC	27.4200	712
/19/03	BOT		14	BECTON DICKINSON CO	32.5200	455
/19/03	BOT		6	BIOGEN INC MASS	38.2200	229
/19/03	BOT		14	BLOCK H&R INC	37.3800	523
/19/03	BOT		35	BOEING COMPANY	29.7900	1,042
/19/03	BOT		20	BOSTON SCIENTIFIC CORP	41.8700	837
/19/03	BOT		19	BED BATH & BEYOND INC	33.2500	631
19/03	BOT		9	BURLINGTON RESOURCES IN	44.4500	400
19/03	BOT		11	COMPASS BANCSHARES INC	31.4000	345
19/03	SLD		20C	COMCAST CRP NEW CL A SP	25.0300	500C
19/03	BOT		13	CADBURY SCHWEPPES ADR	20.8000	270
19/03	SLD		54C	CADENCE DESIGN SYS INC	10.0000	539C
19/03	BOT		8	CINERGY CORP COM	31.5200	252
19/03	BOT		17	CNF INC DEL CO	30.0800	511
19/03	SLD		20C	CENDANT CORP $0.01	11.6300	232C
19/03	SLD		69C	CITIGROUP INC	33.3000	2,297C
19/03	BOT		34	CONVERGYS CORP	12.3300	419

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SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/19/03	BOT	21	CANON INC ADR REP5SH	35.9400	754
/19/03	SLD	19C	CHEVRONTEXACO CORP	64.4200	1,223C
/19/03	BOT	13	COMPANHIA VALE DO RIO	27.6000	358
/19/03	BOT	30	CONOCOPHILLIPS	49.5400	1,486
/19/03	BOT	14	CHARTER ONE FINL INC CO	28.8100	403
/19/03	SLD	35C	CHUBB CORP	48.9100	1,711C
/19/03	BOT	20	CISCO SYSTEMS INC CO	14.3700	287
/19/03	BOT	13	CLOROX CO DEL COM	41.1400	534
/19/03	BOT	12	COCA COLA COM	40.7600	489
/19/03	BOT	40	COMPUTER ASSOC INTL INC	13.7300	549
/19/03	SLD	4C	COMPUTER SCIENCE CRP	31.5800	126C
/19/03	BOT	67	CONAGRA FOODS INC	24.0100	1,608
/19/03	BOT	16	DIAMOND OFFSHORE DRLNG	21.0200	336
/19/03	BOT	9	DOLLAR TREE STORES INC	21.2000	190
/19/03	BOT	32	DOUBLECLICK INC DEL CO	6.2900	201
/19/03	BOT	25	DELL COMPUTER CORP	25.9800	649
/19/03	BOT	12	DELUXE CORPORATION	39.8600	478
/19/03	BOT	4	ENI S P A SPONSORED AD	72.3600	289
/19/03	BOT	41	EDISON INTL CALIF	11.5300	472
/19/03	BOT	76	ENERGY EAST CORP CO	19.4100	1,475
/19/03	BOT	12	EBAY INC CO	76.7900	921
/19/03	BOT	5	EATON CORP	70.2700	351
/19/03	BOT	41	EXXON MOBIL CORP CO	33.8000	1,385
/19/03	BOT	32	EARTHLINK INC COM	5.1200	163
/19/03	BOT	11	ECOLAB INC	48.5900	534
/19/03	BOT	9	E.ON AG ADR	39.8000	358
/19/03	BOT	9	ELECTRONIC ARTS INC DE	51.5600	464
/19/03	BOT	28	FPL GROUP INC	57.6300	1,613
/19/03	SLD	16C	FIRST DATA CORPORATION	34.7800	556C
/19/03	BOT	23	FAMILY DOLLAR STORES	29.5500	679
/19/03	BOT	8	FEDRTD DPT STORS DEL NE	25.7600	206
/19/03	BOT	26	FREEPRT-MCMRAN CPR&GLD	17.1300	445
/19/03	BOT	8	FLUOR CORP NEW DEL CO	28.5500	228
/19/03	BOT	19	FANNIE MAE (USA) COM NP	65.2500	1,239
/19/03	BOT	67	FLEETBOSTON FINL CORP	24.9400	1,670
/19/03	BOT	15	FOREST LABS INC	48.6200	729
/19/03	SLD	18C	FRANKLIN RES INC	32.9200	592C
/19/03	BOT	23	GROUPE DANONE SPON ADR	24.2900	558
/19/03	BOT	31	GAP INC DELAWARE	14.9800	464
/19/03	BOT	13	GLAXOSMITHKLINE PLC AD	36.5900	475
/19/03	SLD	75C	GENERAL MOTORS NEW CL H	10.0800	755C
/19/03	SLD	10C	GENL DYNAMICS CORP CO	65.1100	651C
/19/03	BOT	75	GENERAL ELECTRIC	23.0600	1,729
19/03	BOT	14	GENERAL MILLS	45.1000	631

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FRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/19/03	BOT		13	HARTE-HANKS INC DEL $1	18.0600	234
/19/03	BOT		26	HARTFORD FINL SVCS GROU	37.0600	963
/19/03	BOT		16	HSBC HLDG PLC SPNADR NE	54.3500	869
/19/03	BOT		106	HEWLETT PACKARD CO DE	17.9300	1,900
/19/03	BOT		89	HUNTNGTN BANCSHS INC MD	19.0800	1,698
/19/03	BOT		13	HUTCHISN WHAMPOA ADR	32.1000	417
/19/03	BOT		5	ITT INDS INC$1PV INDIAN	56.5600	282
/19/03	BOT		10	INTEL CORP	16.9090	169
/19/03	BOT		33	INGERSOLL RAND CO LTD A	38.4800	1,269
/19/03	BOT		28	INTL BUSINESS MACH	79.3000	2,220
/19/03	BOT		8	INTL GAME TECHNOLOGY	75.9200	607
/19/03	BOT		22	INTL FLAVORS&FRAGRNC	31.6200	695
/19/03	SLD		59C	INTL PAPER CO	35.2200	2,077C
/19/03	BOT		12	INTUIT INC CO	45.0900	541
/19/03	BOT		17	JANUS CAPITAL GROUP INC	12.0300	204
/19/03	BOT		31	JOHNSON AND JOHNSON CO	52.6900	1,633
/19/03	BOT		18	KING PHARMACEUTICALS IN	16.0500	288
/19/03	BOT		97	KNIGHT TRADING GROUP IN	4.9600	481
/19/03	BOT		25	KONINKL PHIL E NY SH NE	17.1300	428
/19/03	SLD		18C	KIMBERLY CLARK	45.2800	815C
/19/03	BOT		4	KNIGHT RIDDER INC	63.6400	254
/19/03	SLD		135C	KROGER CO	13.8900	1,875C
/19/03	BOT		10	LEXMARK INTL INC CL A	60.1400	601
/19/03	BOT		103	LIMITED BRANDS INC	11.4600	1,180
/19/03	BOT		21	LOWE'S COMPANIES INC	35.1600	738
/19/03	BOT		14	MERCURY INTERACTIVE COR	35.7300	500
/19/03	BOT		6	MARTIN MARIETTA MATLS	28.2600	169
/19/03	BOT		28	MITSUBISHI CP SPNSRD AD	13.6000	380
/19/03	BOT		14	MILLENNIUM PHARMS INC	7.0000	98
/19/03	SLD		16C	MORGAN STANLEY	36.7800	588C
/19/03	BOT		20	MCKESSON CORPORATION CO	27.0200	540
/19/03	BOT		15	MILLEA HOLDINGS INC ADR	34.7500	521
/19/03	BOT		4	MAGNA INTL INC CL A VTG	55.6200	222
/19/03	SLD		18C	MBNA CORP CO	14.7900	266C
/19/03	BOT		57	MARSHALL & ILSLEY CORP	26.5400	1,512
/19/03	BOT		116	MATTEL INC CO	20.7500	2,407
/19/03	BOT		21	MATSUSHTA EL IND AD	9.8500	206
/19/03	BOT		15	MAYTAG CORP	24.9300	373
/19/03	BOT		64	MERCK&CO INC	54.3200	3,476
/19/03	BOT		71	MICROSOFT CORP	24.5900	1,745
/19/03	BOT		37	NEXTEL COMMUNICATIONS	13.2600	490
/19/03	BOT		8	NATL AUSTRALIA B SPN AD	87.3900	699
/19/03	BOT		20	NOVARTIS ADR	35.2700	705
/19/03	BOT		15	NEWELL RUBBERMAID INC	28.8400	432

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
': MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/19/03	BOT		21	NTT DOCOMO INC SPD AD	20.2500	425
/19/03	BOT		11	NOBLE ENERGY INC	34.9500	384
/19/03	BOT		10	NESTLE S A REP RG SH AD	48.2500	482
/19/03	BOT		37	NOKIA CORP ADR	13.9200	515
/19/03	BOT		4	NORTHROP GRUMMAN CORP	91.9800	367
/19/03	SLD		2C	NUCOR CORPORATION	40.5300	81C
/19/03	BOT		86	ORACLE CORP $0.01 DE	12.2790	1,055
/19/03	BOT		16	OUTBACK STEAKHOUSE INC	30.4200	486
/19/03	BOT		129	PARAMETRIC TECHNOLOGY C	2.0000	258
/19/03	BOT		97	J C PENNEY CO COM	18.5900	1,803
/19/03	SLD		25C	PEPSICO INC	40.1000	1,002C
/19/03	BOT		15	PFIZER INC DEL PV$0.05	29.2900	439
/19/03	BOT		20	PITNEY BOWES INC	32.2500	645
/19/03	SLD		25C	PRAXAIR INC	53.4900	1,337C
/19/03	BOT		22	PROCTER GAMBLE	83.6000	1,839
/19/03	BOT		20	PROTECTIVE LIFE CORP CO	26.7100	534
/19/03	SLD		11C	QUEST DIAGNOSTICS INC	51.7000	568C
/19/03	BOT		21	QUALCOMM INC	35.1500	738
/19/03	BOT		14	QLOGIC CORP	35.5800	498
/19/03	BOT		21	QUINTILES TRANSNATL COR	12.2200	256
/19/03	BOT		14	REED ELSEVIER PLC SP AD	28.3600	397
/19/03	BOT		6	RIO TINTO PLC SPNSRD AD	79.2300	475
/19/03	BOT		25	READERS DIGEST ASSOC IN	10.8500	271
/19/03	BOT		15	ROYAL DUTCH PETR EUR.56	39.6000	594
/19/03	BOT		19	RAYTHEON CO DELAWARE NE	28.4500	540
/19/03	BOT		7	ROCHE HLDG LTD SPN AD	60.5000	423
/19/03	BOT		107	SPRINT CORP PCS COM SR	4.2600	455
/19/03	SLD		51C	SBC COMMUNICTNS INC PV$	23.3000	1,188C
/19/03	BOT		32	SARA LEE CORP CO	20.0100	640
/19/03	BOT		13	SUNOCO INC PV$1 PA	33.8600	440
/19/03	BOT		37	SMURFIT-STONE CONTAINER	13.5500	501
/19/03	BOT		14	SMITHFILDS FOODS PV$0.5	17.9000	250
/19/03	BOT		15	SONY CORP ADR NEW	39.7000	595
/19/03	BOT		18	SOVEREIGN BANCRP INC CO	13.1000	235
/19/03	BOT		41	STAPLES INC	16.3000	668
/19/03	BOT		9	STRYKER CORP	63.9900	575
/19/03	BOT		14	SUNGARD DATA SYS INC	21.0200	294
/19/03	BOT		74	SYMBOL TECHNOLOGIES DEL	10.0400	742
/19/03	BOT		24	SYSCO CORPORATION	29.0600	697
/19/03	SLD		36C	TJX COS INC NEW	16.8800	607C
/19/03	BOT		5	TOTAL FINA ELF SA SPNAD	65.9900	329
/19/03	BOT		13	TECH DATA CORP	21.7600	282
/19/03	BOT		5	TELECOM ITALIA SPA SPAD	71.0500	355
/19/03	BOT		20	TPG N V ADR	15.5600	311

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/19/03	BOT		59	TAIWAN S MANUFCTRING AD	6.9900	412
/19/03	BOT		19	TRIZEC PPTYS INC	8.8400	167
/19/03	BOT		41	TIBCO SOFTWARE INC	5.9000	241
/19/03	SLD		55C	TARGET CORP COM	27.7100	1,524C
/19/03	BOT		17	TOYOTA MOTOR CORP ADR	49.4500	840
/19/03	BOT		13	UPM KYMMENE OY SPSD AD	29.1900	379
/19/03	BOT		8	UNILEVER NV NEW	55.6100	444
/19/03	BOT		10	UNITEDHEALTH GROUP INC	82.1700	821
/19/03	BOT		9	UBS AG NEW	43.1900	388
/19/03	BOT		28	UNION PACIFIC CORP	55.9500	1,566
/19/03	BOT		17	UNTD OVERSEAS BK SPN AD	12.5000	212
/19/03	BOT		7	UNOCAL CORP	26.1800	183
/19/03	BOT		200	VIGNETTE CORP	1.6400	328
/19/03	SLD		39C	VERIZON COMMUNICATNS CO	36.7100	1,431C
/19/03	SLD		10C	VODAFONE GRP PLC SPN AD	18.4500	184C
/19/03	BOT		11	VERTEX PHARMCTLS INC	12.5100	137
/19/03	BOT		14	VALASSIS COMMUNCN INC	23.0200	322
/19/03	SLD		30C	VIACOM INC CL B	38.1100	1,143C
/19/03	BOT		47	WASHINGTON MUTUAL INC	35.5800	1,672
/19/03	SLD		17C	XL CAPITAL LTD CL A	71.7200	1,219C
/19/03	BOT		32	WAL MART STORES INC	48.9200	1,565
/19/03	BOT		27	WEYERHAEUSER CO	50.5700	1,365
/19/03	BOT		175	XEROX CORP	9.1500	1,601
/19/03	BOT		32	YAHOO INC CAL PV$0.0001	19.1600	613
/19/03	SLD		7C	WACHOVIA CORP NEW	35.3500	247C
/19/03	SLD		54C	WYETH	37.7500	2,038C
/18/03	SLD	N	2,000C	FORD MOTOR CREDIT	100.2500	2,042C
/18/03	DUDB		20	MICROSOFT CORP	.0000	0
/13/03	SLD	N	2,000C	ASSOCIATES CORP	111.3600	2,264C
/13/03	SLD	N	2,000C	BANK ONE CORP	110.7040	2,220C
/13/03	SLD	N	2,000C	GENERAL ELECTRIC CAP CR	103.2280	2,086C
/13/03	SLD	N	2,000C	IBM CORPORATION	108.2040	2,169C
/13/03	SLD	N	2,000C	CONOCO INC	104.6300	2,133C
/13/03	SLD	N	2,000C	FORD MOTOR CREDIT	102.2500	2,082C
/13/03	CXLS		2,000	FORD MOTOR CREDIT	102.2500	2,082
/13/03	SLD	N	2,000C	TARGET CORP	107.3190	2,165C
/13/03	SLD	N	2,000C	WALT DISNEY COMPANY	101.4070	2,046C
/13/03	SLD	N	1,000C	FEDERAL NATL MTGE ASSN	108.9220	1,098C
/13/03	SLD		5,000C	FNMA P582598 06 50%2031	104.0937	3,461C
/13/03	SLD		6,000C	FNMA P580166 06%2016	104.5625	3,838C
/13/03	SLD		40C	ABBOTT LABS	34.5400	1,381C
/13/03	SLD		40C	ALTRIA GROUP INC	36.9700	1,478C
/13/03	SLD		50C	ALBERTSONS INC	19.2000	959C
/13/03	SLD		100C	AVAYA INC DELAWARE	2.3100	230C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/13/03	SLD		60C	AMERICA MOVIL SER L ADR	12.6000	755C
/13/03	SLD		110C	ALCATEL S.A. SPD AD	7.2100	793C
/13/03	SLD		41C	ABN-AMRO HOLDING NV ADR	15.2500	625C
/13/03	SLD		40C	ANADARKO PETE CORP	42.4500	1,697C
/13/03	SLD		168C	ARCHER DANIELS MIDLD	11.7900	1,980C
/13/03	SLD		160C	BANCO B VIZ ARGT SA ADR	8.1300	1,300C
/13/03	SLD		110C	BAYERISCHE H-UND V SPAD	10.8500	1,193C
/13/03	SLD		20C	BANK OF AMERICA CORP	66.9400	1,338C
/13/03	SLD		40C	BASF AG SPONSORED AD	35.4700	1,418C
/13/03	SLD		80C	BAE SYS PLC SPN ADR	7.1000	567C
/13/03	SLD		50C	BRASIL TELECOM PAR SPAD	22.9000	1,144C
/13/03	SLD		40C	BT GROUP PLC AD	27.7200	1,108C
/13/03	SLD		30C	BELLSOUTH CORP	22.2400	667C
/13/03	SLD		25C	BEST BUY CO INC	25.8200	645C
/13/03	SLD		40C	BOEING COMPANY	29.2500	1,169C
/13/03	SLD		60C	BRISTOL MYERS SQUIBB CO	22.6500	1,358C
/13/03	SLD		55C	CVS CORP DELAWARE CO	24.4400	1,344C
/13/03	SLD		30C	CIT GROUP INC NEW	17.2800	518C
/13/03	SLD		60C	CEMEX SA DE CV SPND AD	17.0200	1,021C
/13/03	SLD		40C	CATERPILLAR INC DEL	41.4800	1,659C
/13/03	SLD		55C	DOLLAR TREE STORES INC	20.5600	1,130C
/13/03	SLD		60C	DEUTSCHE TELE AG SPN AD	13.2500	794C
/13/03	SLD		30C	DOMINION RES INC NEW VA	52.9500	1,588C
/13/03	SLD		80C	DUKE ENERGY CORP NC NPV	13.2500	1,059C
/13/03	SLD		30C	DU PONT E I DE NEMOURS	36.7100	1,101C
/13/03	SLD		180C	ELECTROBRAS CENTRAIS AD	2.2800	410C
/13/03	SLD		90C	EDISON INTL CALIF	10.7700	969C
/13/03	SLD		80C	ELECTR DATA SYS CORP NE	15.2700	1,221C
/13/03	SLD		30C	E.ON AG ADR	39.2100	1,176C
/13/03	SLD		70C	EL PASO CORPORATION	3.4300	240C
/13/03	SLD		50C	FLEETBOSTON FINL CORP	23.9200	1,195C
/13/03	SLD		90C	FORD MOTOR CO NEW	8.4600	761C
/13/03	SLD		20C	GANNETT CO	69.9100	1,398C
/13/03	SLD		20C	GOLDMAN SACHS GROUP INC	63.9700	1,279C
/13/03	SLD		65C	GENERAL ELECTRIC	22.0000	1,429C
/13/03	SLD		45C	GILLETTE CO CO	28.5200	1,283C
/13/03	SLD		60C	GOODYEAR TIRE RUBBER	4.0300	241C
/13/03	SLD		50C	GREAT LAKES CHEMICAL	20.8400	1,041C
/13/03	SLD		20C	HSBC HLDG PLC SPNADR NE	53.2600	1,065C
/13/03	SLD		75C	HEWLETT PACKARD CO DE	16.8900	1,266C
/13/03	SLD		65C	HUMANA INC	8.9700	583C
/13/03	SLD		20C	INTL PAPER CO	35.4400	708C
/13/03	SLD		40C	J P MORGAN CHASE AND CO	21.0500	841C
/13/03	SLD		120C	KONINKLIJKE A NV SPD AD	11.1500	1,337C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
:: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
!/13/03	SLD		30C	KEYSPAN CORP	31.1600	934C
!/13/03	SLD		70C	KT CORP ADR	18.0000	1,259C
!/13/03	SLD		5C	KIMBERLY CLARK	43.9400	219C
!/13/03	SLD		1,040C	LUCENT TECHNOLOGIES INC	1.5900	1,653C
!/13/03	SLD		20C	LOEWS CORP	42.0000	839C
!/13/03	SLD		56C	MARKS AND SPENCER GP AD	27.9000	1,562C
!/13/03	SLD		26C	MMO2 PLC AD	7.8000	202C
!/13/03	SLD		65C	METLIFE INC COM	24.6600	1,602C
!/13/03	SLD		210C	MITSUBISHI TOKYO FIN AD	5.3600	1,125C
!/13/03	SLD		40C	MILLEA HOLDINGS INC ADR	34.5300	1,381C
!/13/03	SLD		195C	MATSUSHTA EL IND AD	9.7000	1,891C
!/13/03	SLD		50C	MCDONALDS CORP CO	13.5200	675C
/13/03	SLD		15C	MERCK&CO INC	51.9700	779C
/13/03	SLD		130C	MICRON TECHNOLOGY INC	6.7200	873C
/13/03	SLD		120C	MOTOROLA INC CO	7.9900	958C
/13/03	SLD		150C	NIPPON TELG&TEL SPDN AD	17.8900	2,683C
/13/03	SLD		10C	NESTLE S A REP RG SH AD	48.1500	481C
/13/03	SLD		25C	OMNICOM GROUP COM	52.8100	1,320C
/13/03	SLD		25C	OUTBACK STEAKHOUSE INC	30.6600	766C
/13/03	SLD		60C	PETROLEO BRAS SA ADR	12.5800	754C
/13/03	SLD		30C	REUTERS GROUP PLC ADR	14.9600	448C
/13/03	SLD		110C	REPSOL YPF S A SPND AD	13.9300	1,532C
/13/03	SLD		60C	SAFEWAY INC NE	19.9900	1,199C
/13/03	SLD		45C	SEMPRA ENERGY	22.6000	1,016C
/13/03	SLD		60C	SCHERING PLOUGH CORP	18.0100	1,080C
/13/03	SLD		70C	SHERWIN WILLIAMS	25.7600	1,803C
/13/03	SLD		50C	SPRINT CORP CO	11.8300	591C
/13/03	SLD		20C	SUNTRUST BKS INC CO	53.8100	1,076C
/13/03	SLD		60C	TELEFONOS M SA RP L ADR	28.7500	1,724C
/13/03	SLD		130C	TYCO INTL LTD NEW CO	14.2100	1,847C
/13/03	SLD		10C	TARGET CORP COM	26.9300	269C
/13/03	SLD		102C	TRAVELERS PPTY CAS CRP	14.7300	1,502C
/13/03	SLD		40C	TELEFONICA SA SPAIN AD	28.2300	1,129C
/13/03	SLD		70C	TOYS R US	7.9500	556C
/13/03	SLD		20C	UNILEVER NV NEW	54.2500	1,084C
/13/03	SLD		120C	UNISYS CORP CO	8.3400	1,000C
/13/03	SLD		40C	UNOCAL CORP	26.0400	1,041C
/13/03	SLD		50C	UST INC COM	27.9900	1,399C
/13/03	SLD		15C	V F CORPORATION	34.4600	516C
/13/03	SLD		20C	VERIZON COMMUNICATNS CO	35.4200	708C
/13/03	SLD		15C	VULCAN MATERIALS CO	31.2800	469C
/13/03	SLD		200C	XEROX CORP	8.3300	1,665C
/13/03	SLD		80C	WASTE MANAGEMENT INC NE	21.4600	1,716C
/13/03	SLD		25C	WELLS FARGO & CO NEW DE	45.0700	1,126C

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
':' MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
:/12/03	JE		2,000	ASSOCIATES CORP	.0000	0
:/12/03	JE		2,000	BANK ONE CORP	.0000	0
:/12/03	JE		2,000	GENERAL ELECTRIC CAP CR	.0000	0
/12/03	JE		2,000	IBM CORPORATION	.0000	0
/12/03	JE		2,000	CONOCO INC	.0000	0
/12/03	JE		2,000	FORD MOTOR CREDIT	.0000	0
/12/03	JE		2,000	TARGET CORP	.0000	0
/12/03	JE		2,000	WALT DISNEY COMPANY	.0000	0
/12/03	JE		1,000	FEDERAL NATL MTGE ASSN	.0000	0
/12/03	JE		5,000	FNMA P582598 06 50%203	.0000	0
/12/03	JE		6,000	FNMA P580166 06%201	.0000	0
/12/03	JE		40	ABBOTT LABS	.0000	0
/12/03	JE		25	AIR PRODUCTS&CHEM	.0000	0
/12/03	JE		40	ALTRIA GROUP INC	.0000	0
/12/03	JE		50	ALBERTSONS INC	.0000	0
/12/03	JE		100	AVAYA INC DELAWARE	.0000	0
/12/03	JE		60	AMERICA MOVIL SER L ADR	.0000	0
/12/03	JE		110	ALCATEL S.A. SPD AD	.0000	0
/12/03	JE		41	ABN-AMRO HOLDING NV ADR	.0000	0
/12/03	JE		40	ANADARKO PETE CORP	.0000	0
/12/03	JE		168	ARCHER DANIELS MIDLD	.0000	0
/12/03	JE		160	BANCO B VIZ ARGT SA ADR	.0000	0
/12/03	JE		110	BAYERISCHE H-UND V SPAD	.0000	0
/12/03	JE		20	BANK OF AMERICA CORP	.0000	0
/12/03	JE		40	BASF AG SPONSORED AD	.0000	0
/12/03	JE		80	BAE SYS PLC SPN ADR	.0000	0
/12/03	JE		50	BRASIL TELECOM PAR SPAD	.0000	0
/12/03	JE		40	BT GROUP PLC AD	.0000	0
/12/03	JE		30	BELLSOUTH CORP	.0000	0
/12/03	JE		25	BEST BUY CO INC	.0000	0
/12/03	JE		40	BOEING COMPANY	.0000	0
/12/03	JE		60	BRISTOL MYERS SQUIBB CO	.0000	0
/12/03	JE		55	CVS CORP DELAWARE CO	.0000	0
/12/03	JE		30	CIT GROUP INC NEW	.0000	0
/12/03	JE		55	CITIGROUP INC	.0000	0
/12/03	JE		60	CEMEX SA DE CV SPND AD	.0000	0
/12/03	JE		25	CHEVRONTEXACO CORP	.0000	0
/12/03	JE		40	CATERPILLAR INC DEL	.0000	0
/12/03	JE		15	CHUBB CORP	.0000	0
/12/03	JE		55	DOLLAR TREE STORES INC	.0000	0
/12/03	JE		60	DEUTSCHE TELE AG SPN AD	.0000	0
/12/03	JE		30	DOMINION RES INC NEW VA	.0000	0
/12/03	JE		80	DUKE ENERGY CORP NC NPV	.0000	0
/12/03	JE		30	DU PONT E I DE NEMOURS	.0000	0

FORMATION PURPOSES ONLY - ACCOUNT STATEMENT IS OFFICIAL RECORD
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<MORE>

PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/12/03	JE		180	ELECTROBRAS CENTRAIS AD	.0000	0
/12/03	JE		90	EDISON INTL CALIF	.0000	0
/12/03	JE		80	ELECTR DATA SYS CORP NE	.0000	0
/12/03	JE		30	E.ON AG ADR	.0000	0
/12/03	JE		70	EL PASO CORPORATION	.0000	0
/12/03	JE		50	FLEETBOSTON FINL CORP	.0000	0
/12/03	JE		90	FORD MOTOR CO NEW	.0000	0
/12/03	JE		20	GANNETT CO	.0000	0
/12/03	JE		20	GOLDMAN SACHS GROUP INC	.0000	0
/12/03	JE		65	GENERAL ELECTRIC	.0000	0
/12/03	JE		45	GILLETTE CO CO	.0000	0
/12/03	JE		60	GOODYEAR TIRE RUBBER	.0000	0
/12/03	JE		50	GREAT LAKES CHEMICAL	.0000	0
/12/03	JE		20	HSBC HLDG PLC SPNADR NE	.0000	0
/12/03	JE		75	HEWLETT PACKARD CO DE	.0000	0
/12/03	JE		65	HUMANA INC	.0000	0
/12/03	JE		60	INTL PAPER CO	.0000	0
/12/03	JE		40	J P MORGAN CHASE AND CO	.0000	0
/12/03	JE		120	KONINKLIJKE A NV SPD AD	.0000	0
/12/03	JE		30	KEYSPAN CORP	.0000	0
/12/03	JE		70	KT CORP ADR	.0000	0
/12/03	JE		35	KIMBERLY CLARK	.0000	0
/12/03	JE		80	KROGER CO	.0000	0
/12/03	JE		1,040	LUCENT TECHNOLOGIES INC	.0000	0
/12/03	JE		20	LOEWS CORP	.0000	0
/12/03	JE		56	MARKS AND SPENCER GP AD	.0000	0
/12/03	JE		26	MMO2 PLC AD	.0000	0
/12/03	JE		65	METLIFE INC COM	.0000	0
/12/03	JE		210	MITSUBISHI TOKYO FIN AD	.0000	0
/12/03	JE		40	MILLEA HOLDINGS INC ADR	.0000	0
/12/03	JE		195	MATSUSHTA EL IND AD	.0000	0
/12/03	JE		50	MCDONALDS CORP CO	.0000	0
/12/03	JE		15	MERCK&CO INC	.0000	0

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<END>

CMA ACCOUNT

Consults

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
Security Transactions						
02/05	Sale	-5	EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 24.110000 TJX COS INC NEW	18.390		91.94
02/05	Sale	-5	EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 18.390000 WACHOVIA CORP NEW	35.630		178.14
02/07	Purchase	5	EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 35.630000 CHUBB CORP	51.951	259.76	
02/07	Sale	-10	PRICE 51.951900 CISCO SYSTEMS INC COM	13.091		130.91
02/10	Sale	-1,000	PRICE 13.091900 FNMA P254637 05 50% 2033 AMORTIZED FACTOR 0.99794 AMORTIZED VALUE 997	101.500		1,014.29
02/10	Sale	-20	AS OF 01/31 PRICE 101.500000 AOL TIME WARNER INC	10.723		214.46
02/11	Sale	-24	AS OF 02/05 PRICE 10.723500 AOL TIME WARNER INC	10.602		254.44
2/11	Purchase	15	AS OF 02/06 PRICE 10.602000 COMCAST CRP NEW CL A SPL	25.203	378.06	
2/11	Purchase	10	PRICE 25.203800 CISCO SYSTEMS INC COM	13.303	133.04	
2/11	Purchase	5	AS OF 02/06 PRICE 13.303500 COMPUTER SCIENCE CRP	32.553	162.77	
			PRICE 32.553200			

MAUREEN FERGUSON AND

onthly Activity

ate		Transaction	Quantity	Description	Price	Debit	Credit
curity Transactions							
2/05	•	Sale	-3,000	IBM CORP BONDS 04.750% NOV 29 2012 INTEREST FROM 11/27/02 FIRST COUPON 05/29/03 AS OF 01/31 PRICE 99.993000	99.993		3,026.71
2/05	•	Sale	-5	BAKER HUGHES INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 29.660000	29.660		148.29
2/05	•	Sale	-5	CADENCE DESIGN SYS INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 9.720000	9.720		48.59
/05	•	Sale	-5	CENDANT CORP $0.01 EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 11.010000	11.010		55.04
/05	•	Sale	-5	CISCO SYSTEMS INC COM EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 13.290000	13.290		66.44
/05	•	Sale	-5	GENERAL MOTORS NEW CL H EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 10.060000	10.060		50.29
/05	•	Sale	-5	INTEL CORP EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 15.471000	15.471		77.35
/05	•	Sale	-5	MORGAN STANLEY EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 37.240000	37.240		186.19
/05	•	Sale	-5	MICROSOFT CORP EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 47.620000	47.620		238.09
/05	•	Sale	-5	PRAXAIR INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 54.010000	54.010		270.04
/05	•	Sale	-5	SBC COMMUNICTNS INC PV$1	24.110		120.54

MAUREEN FERGUSON AND

CMA ACCOUNT

Consults

ıthly Activity

		Transaction	Quantity	Description	Price	Debit	Credit
rity Transactions							
05	•	Sale	-3,000	IBM CORP BONDS 04.750% NOV 29 2012 INTEREST FROM 11/27/02 FIRST COUPON 05/29/03 AS OF 01/31 PRICE 99.993000	99.993		3,026.71
05	•	Sale	-5	BAKER HUGHES INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 29.660000	29.660		148.29
05	•	Sale	-5	CADENCE DESIGN SYS INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 9.720000	9.720		48.59
05	•	Sale	-5	CENDANT CORP $0.01 EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 11.010000	11.010		55.04
5	•	Sale	-5	CISCO SYSTEMS INC COM EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 13.290000	13.290		66.44
5	•	Sale	-5	GENERAL MOTORS NEW CL H EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 10.060000	10.060		50.29
5	•	Sale	-5	INTEL CORP EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 15.471000	15.471		77.35
5	•	Sale	-5	MORGAN STANLEY EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 37.240000	37.240		186.19
5	•	Sale	-5	MICROSOFT CORP EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 47.620000	47.620		238.09
5	•	Sale	-5	PRAXAIR INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 54.010000	54.010		270.04
,	•	Sale	-5	SBC COMMUNICTNS INC PV$1	24.110		120.54

MAUREEN FERGUSON AND

CMA ACCOUNT

Consults

ly Activity

		Transaction	Quantity	Description	Price	Debit	Credit
Transactions							
				EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 42.950000			
10		Purchase	5	WYETH PRICE 39.544900	39.544	197.72	
14	*	Sale	-7,000	FNMA P254447 06% 2032 AMORTIZED VALUE 6528 PRICE 103.296875	103.296		6,758.28
14		Purchase	15,000	FNMA P254637 05 50%2033 AMORTIZED FACTOR 1.00000 AMORTIZED VALUE 15000 AS OF 01/09 PRICE 101.312500	101.312	15,226.67	
14	*	Sale	-8,000	FNMA P254406 06 50% 2032 AMORTIZED VALUE 6623 PRICE 104.078125	104.078		6,909.66
14	*	Sale	-2	GENERAL MOTORS NEW CL H AS OF 01/09 PRICE 12.012900	12.012		24.02
15	*	Sale	-11	GENERAL MOTORS NEW CL H PRICE 12.074400	12.074		132.81
16	*	Sale	-9	GENERAL MOTORS NEW CL H PRICE 12.124400	12.124		109.11
17	*	Sale	-6	GENERAL MOTORS NEW CL H PRICE 12.016000	12.016		72.09
21	*	Sale	-25	APPLIED MATERIAL INC PRICE 14.501600	14.501		362.52
21	*	Sale	-7	GENERAL MOTORS NEW CL H PRICE 11.809400	11.809		82.66
24	*	Sale	-4	NUCOR CORPORATION PRICE 40.872700	40.872		163.48
27	*	Sale	-10	COSTCO WHOLESALE CRP DEL PRICE 28.998800	28.998		289.98
27		Purchase	4	CHUBB CORP PRICE 55.689300	55.689	222.76	
27	*	Sale	-10	FIRST DATA CORPORATION PRICE 34.519400	34.519		345.17
27	*	Sale	-1	NUCOR CORPORATION PRICE 39.468200	39.468		39.46
28		Purchase	8	CHUBB CORP PRICE 56.711600	56.711	453.69	
29		Purchase	3	CHUBB CORP PRICE 56.414900	56.414	169.24	
31		Purchase	5	WYETH PRICE 36.728200	36.728	183.64	

MAUREEN FERGUSON AND

CMA ACCOUNT

Consults

ly Activity

le	Transaction	Quantity	Description	Price	Debit	Credit
y Transactions						
/10 -	Sale	-5	FIRST DATA CORPORATION EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 36.920000	36.920		184.59
'10 -	Sale	-5	FRANKLIN RES INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 36.330000	36.330		181.64
'10 -	Sale	-10	GENERAL MOTORS NEW CL H EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 11.930000	11.930		119.29
10 -	Sale	-5	GENL DYNAMICS CORP COM EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 79.810000	79.810		399.03
10 -	Sale	-5	KIMBERLY CLARK EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 47.170000	47.170		235.84
10 -	Sale	-10	KROGER CO EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 15.950000	15.950		159.49
10 -	Sale	-5	PFIZER INC DEL PV$0.05 EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 31.780000	31.780		158.89
10 -	Sale	-5	QUEST DIAGNOSTICS INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 59.910000	59.910		299.54
10 -	Sale	-5	TJX COS INC NEW EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 20.020000	20.020		100.09
10 -	Sale	-5	VERIZON COMMUNICATNS COM EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 43.580000	43.580		217.89
10 -	Sale	-5	VODAFONE GRP PLC SPN ADR EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 19.490000	19.490		97.44
10 -	Sale	-5	VIACOM INC CL B	42.950		214.74

MAUREEN FERGUSON AND

CMA ACCOUNT

Merrill Lynch Consults Service

ily Activity

e		Transaction	Quantity	Description	Price	Debit	Credit
y Transactions							
				INTEREST FROM 12/06/02 FIRST COUPON 07/15/03 UNSOLICITED ORDER PRICE 101.983000			
10		Purchase	3,000	U.S. TRSY INFLATION NOTE 3.00% JUL 15 2012 INTEREST FROM 07/15/02 FIRST COUPON 01/15/03 REF CPI @ PUR: 181.30000 REF CPI @ ISS: 179.80000 INDEX RATIO: 1.00834 INFL ADJ PRIN: 3025.02 PRICE 105 17/ 64	105.265	3,228.44	
10	•	Sale	-5	AIR PRODUCTS&CHEM EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 43.890000	43.890		219.44
10	•	Sale	-5	ADL TIME WARNER INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 14.150000	14.160		70.79
10	•	Sale	-5	APPLIED MATERIAL INC EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 15.571000	15.571		77.85
10	•	Sale	-5	BAXTER INTERNTL INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 28.870000	28.870		144.34
10	•	Sale	-5	CADENCE DESIGN SYS INC EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 9.570000	9.570		47.84
10	•	Sale	-5	CENDANT CORP $0.01 EXECUTED 100PC NYSE AV PX IS SHOWN PER YR AG PRICE 10.960000	10.960		54.79
10	•	Sale	-5	CISCO SYSTEMS INC COM EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 14.570000	14.570		72.84
10	•	Sale	-5	DELL COMPUTER CORP EXECUTED 100PC OTC AV PX IS SHOWN PER YR AG PRICE 28.810000	28.810		144.04

Transactions

09	*	Sale	-1,000	FNMA P254447 06% 2032 AMORTIZED VALUE 932 AS OF 01/07 PRICE 103.437500	103.437	966.00
10	*	Sale	-1,000	HOUSEHOLD FINANCE NOTES 6.375% OCT 15 2011 UNSOLICITED ORDER PRICE 103.549000	103.549	1,050.54
10	*	Sale	-1,000	IBM CORP BONDS 04.750% NOV 29 2012 INTEREST FROM 11/27/02 FIRST COUPON 05/29/03 UNSOLICITED ORDER PRICE 99.449000	99.449	1,000.16
10	*	Sale	-1,000	NM GENL ELEC CAP CORP BE 06DEC02 15JAN08 SEMI-PAY 04.250% FIXRATE	101.983	1,023.84

MAUREEN FERGUSON AND

PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
: MAUREEN & MICHAEL FERGUSON

DATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
/12/03	JE		40C	ALTRIA GROUP INC	.0000	0
/12/03	JE		50C	ALBERTSONS INC	.0000	0
/12/03	JE		100C	AVAYA INC DELAWARE	.0000	0
/12/03	JE		60C	AMERICA MOVIL SER L ADR	.0000	0
/12/03	JE		110C	ALCATEL S.A. SPD AD	.0000	0
/12/03	JE		41C	ABN-AMRO HOLDING NV ADR	.0000	0
/12/03	JE		168C	ARCHER DANIELS MIDLD	.0000	0
/12/03	JE		160C	BANCO B VIZ ARGT SA ADR	.0000	0
/12/03	JE		110C	BAYERISCHE H-UND V SPAD	.0000	0
/12/03	JE		40C	BASF AG SPONSORED AD	.0000	0
/12/03	JE		80C	BAE SYS PLC SPN ADR	.0000	0
/12/03	JE		50C	BRASIL TELECOM PAR SPAD	.0000	0
/12/03	JE		40C	BT GROUP PLC AD	.0000	0
/12/03	JE		30C	BELLSOUTH CORP	.0000	0
/12/03	JE		60C	BRISTOL MYERS SQUIBB CO	.0000	0
/12/03	JE		30C	CIT GROUP INC NEW	.0000	0
/12/03	JE		60C	CEMEX SA DE CV SPND AD	.0000	0
/12/03	JE		60C	DEUTSCHE TELE AG SPN AD	.0000	0
/12/03	JE		80C	DUKE ENERGY CORP NC NPV	.0000	0
/12/03	JE		30C	DU PONT E I DE NEMOURS	.0000	0
/12/03	JE		180C	ELECTROBRAS CENTRAIS AD	.0000	0
/12/03	JE		90C	EDISON INTL CALIF	.0000	0
/12/03	JE		80C	ELECTR DATA SYS CORP NE	.0000	0
/12/03	JE		30C	E.ON AG ADR	.0000	0
/12/03	JE		70C	EL PASO CORPORATION	.0000	0
/12/03	JE		50C	FLEETBOSTON FINL CORP	.0000	0
/12/03	JE		90C	FORD MOTOR CO NEW	.0000	0
/12/03	JE		60C	GOODYEAR TIRE RUBBER	.0000	0
/12/03	JE		50C	GREAT LAKES CHEMICAL	.0000	0
/12/03	JE		20C	HSBC HLDG PLC SPNADR NE	.0000	0
/12/03	JE		40C	J P MORGAN CHASE AND CO	.0000	0
/12/03	JE		120C	KONINKLIJKE A NV SPD AD	.0000	0
/12/03	JE		70C	KT CORP ADR	.0000	0
/12/03	JE		80C	KROGER CO	.0000	0
/12/03	JE		1,040C	LUCENT TECHNOLOGIES INC	.0000	0
/12/03	JE		20C	LOEWS CORP	.0000	0
/12/03	JE		56C	MARKS AND SPENCER GP AD	.0000	0
/12/03	JE		26C	MMO2 PLC AD	.0000	0
/12/03	JE		210C	MITSUBISHI TOKYO FIN AD	.0000	0
/12/03	JE		40C	MILLEA HOLDINGS INC ADR	.0000	0
/12/03	JE		195C	MATSUSHTA EL IND AD	.0000	0
/12/03	JE		50C	MCDONALDS CORP CO	.0000	0
/12/03	JE		130C	MICRON TECHNOLOGY INC	.0000	0
/12/03	JE		120C	MOTOROLA INC CO	.0000	0

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PRC FINANCIAL CONSULTANTS
SECURITY ACTIVITY
MAUREEN & MICHAEL FERGUSON

ATE	TYPE	SOL	QTY	DESCRIPTION	PRICE	NET AMOUNT
12/03	JE		150C	NIPPON TELG&TEL SPDN AD	.0000	0
12/03	JE		10C	NESTLE S A REP RG SH AD	.0000	0
12/03	JE		60C	PETROLEO BRAS SA ADR	.0000	0
12/03	JE		30C	REUTERS GROUP PLC ADR	.0000	0
12/03	JE		110C	REPSOL YPF S A SPND AD	.0000	0
12/03	JE		60C	SAFEWAY INC NE	.0000	0
12/03	JE		60C	SBC COMMUNICTNS INC PV$	.0000	0
12/03	JE		60C	SCHERING PLOUGH CORP	.0000	0
12/03	JE		70C	SHERWIN WILLIAMS	.0000	0
12/03	JE		50C	SPRINT CORP CO	.0000	0
12/03	JE		60C	TELEFONOS M SA RP L ADR	.0000	0
12/03	JE		130C	TYCO INTL LTD NEW CO	.0000	0
12/03	JE		40C	TELEFONICA SA SPAIN AD	.0000	0
12/03	JE		70C	TOYS R US	.0000	0
12/03	JE		120C	UNISYS CORP CO	.0000	0
12/03	JE		50C	UST INC COM	.0000	0
12/03	JE		40C	VERIZON COMMUNICATNS CO	.0000	0
12/03	JE		200C	XEROX CORP	.0000	0
12/03	JE		80C	WASTE MANAGEMENT INC NE	.0000	0
28/03	XCH		40	ALTRIA GROUP INC	.0000	0
28/03	XCH		40C	PHILIP MORRIS COS INC	.0000	0
28/03	BOT		60	CEMEX SA DE CV SPND AD	19.5685	1,174
27/03	BOT		10	NESTLE S A REP RG SH AD	51.3521	513
23/03	BOT		40	BRISTOL MYERS SQUIBB CO	25.2452	1,009
22/03	BOT		40	BAYERISCHE H-UND V SPAD	14.5511	582
22/03	BOT		50	KONINKLIJKE A NV SPD AD	12.6450	632
22/03	BOT		60	MICRON TECHNOLOGY INC	8.6142	516
13/03	SLD		110C	HEWLETT PACKARD CO DE	20.5495	2,260C
10/03	SLD		40C	EXELON CORPORATION	53.3582	2.134C

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	N/A	N/A		N/A			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A	N/A	N/A

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
NASDAQ	MAR 28-MAR31	WASH, D.C.-KEY BISCANE,FL-WASH, D.C.	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
BOARD MEMBER	ROBERTA AND THOMAS FERGUSON FAMILY FOUNDATION
HONORARY ADVISORY BOARD MEMBER	LINK COMMUNITY SCHOOL
HONORARY BOARD MEMBER	CHERUB FOUNDATION

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 JUN -9 PM 3:22

(Office Use Only)

MICHAEL A. FERGUSON
(Full Name)

6 BROKEN ARROW ROAD, WARREN, NJ
(Mailing Address)

(202) 225-5361
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives	State: NEW JERSEY District: 7TH	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and	Mike Ferguson	6/8/04

Name MICHAEL A. FERGUSON

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
SP, DC, JT	Examples: SP Mega Corp. Stock	E $50,001 – $100,000	DIVIDENDS	IV $1,001 – $2,500	P
	Simon & Schuster	C $1,001 – $15,000 (Indefinite)	Other Type of Income (Specify: For Example, Partnership Income or Farm Income): Royalties		
	JT 1st Bank of Paducah, KY accounts	F $100,001 – $250,000	INTEREST	VI $5,001 – $15,000	
JT	MERRILL LYNCH – #XX-XXX 44	F $100,001 – $250,000			
JT	MERRILL LYNCH – #XX-XXX 45	D $15,001 – $50,000			
	MERRILL LYNCH ROTH IRA	C $1,001 – $15,000			
SP	MERRILL LYNCH ROTH IRA	C $1,001 – $15,000			
	MERRILL LYNCH IRA	C $1,001 – $15,000			
SP	MERRILL LYNCH IRA	D $15,001 – $50,000			

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MICHAEL A. FERGUSON

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E

Name MICHAEL A. FERGUSON

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	MERRILL LYNCH – SEE ATTACHED STATEMENTS														
JT	ABBOT LABORATORIES		X		6–13–03	X									
JT	JOHNSON & JOHNSON		X		VARIOUS		X								
JT	PFIZER, INC.		X		VARIOUS	X									
JT	SCHERING PLOUGH		X		6–13–03	X									
JT	BAXTER INTERNATIONAL		X		VARIOUS	X									

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

8

2004 MAY 12 PM 1:36

MC

U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

BOB FILNER
(Full Name)

2428 RAYBURN HOUSE OFFICE BLDG.
(Mailing Address)

WASHINGTON, DC 20515

Daytime Telephone: 225-7933

Filer Status	☒ Member of the U.S. House of Representatives	State: CA District: 51	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bob Filner	5/11/04

1409

Name BOB FILNER | Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SELF-EMPLOYED CONSULTANT	SPOUSE SALARY	NA
	PUBLIC EMPLOYEES RETIREMENT SYSTEM	PENSION	$11,708

For payments to charity in lieu of honoraria, use Schedule II.

Name BOB FILNER | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp Stock					X								X						Royalties				X					X			P
DC	Simon & Schuster		Indefinite																							X						
JT	1st Bank of Paducah, KY accounts						X									X																
	GUARDIAN MUTUAL FUND (WEINBERGER + BERMAN)			X										X							X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB FILNER

Page 4 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	NAT'L HEALTH INSR @ #1		X						X				X					
	OCTUS, INC	X						X				X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB FILNER

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: D DIVIDENDS	E RENT	F INTEREST	G CAPITAL GAINS	H EXCEPTED TRUST	I QUALIFIED BLIND TRUST	J Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	BANK of AMERICA (checking)			X												X						X										
	CONGRESSIONAL FCU			X												X							X									
	L.A. COUNTY SANIT. BONDS	X														X							X									S
	S.D. COUNTY CTBS BOND-2006				X											X								X								
	CALIF. HEALTH FCS BOND				X											X							X									
	NATL HEALTH INSUR CO. #2						X									X									X							
	FRESNO SCHOOL DIST. BOND				X											X								X								
	IRA - MESIROW FINANCIAL				X									X			X							X								
	RESERVE MONEY FUND (MESIROW)				X									X								X										
	G.E. LIFE COMMONWEALTH A&W						X							X							X											
	ROBLA CA. SCHOOL DIST. BOND				X											X								X								
	FRESNO CA. SUM BOND				X											X								X								
	LONG BEACH CA BOND				X											X							X									
	CALIF. HFFA BOND				X											X								X								
	ABBOTT LABS STOCK			X										X								X										
	CHASE MANHATTAN STOCK			X										X								X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BOB FILNER

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	KULICKE & SOFFA STOCK		X					X				X						
	LSI LOGIC CORP. STOCK		X					X				X						
	MIPS TECH INC STOCK	X						X				X						
	NOVELL INC. STOCK		X					X				X						
	FRANKLIN FLEX CAP GROWTH (cap)							X				X						P
	FRANKLIN FED. TAX FREE (cap)							X					X					P

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SCHEDULE IV — TRANSACTIONS

Name BOB FILNER

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	L.A. COUNTY SANITATION BONDS		X		10-01-03	X									
	FRANKLIN FLEX CAP. GROWTH MUT. FDS	X			10-07-03		X								
	FRANKLIN FED TAX FREE MUT. FDS	X			10-07-03		X								

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Center for Latin American Studies, U. of CA. Berkeley	SEPT 19-21	WASH, DC – SAN FRANCISCO – WASH, DC	Y	Y	N	N
	National Education Assoc	JUN 30 – JULY 2	Wash, DC – New Orleans – Wash, DC	Y	Y	N	3 Days

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
6
LEGISLATIVE RESOURCE CENTER
2004 JUN -1 AM 10: 43
U.S. HOUSE OF REPRESENTATIVES
(OFFICE USE ONLY)

JEFFREY L FLAKE
(Full Name)
4222 E. McLELLAN #19 MESA, AZ 85205
(Mailing Address)
Daytime Telephone: 480-654-3145

Filer Status	[X] Member of the U.S. House of Representatives — State: AZ District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jeff Flake	5-22-04

1417

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
JEFF FLAKE FOR CONGRESS	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name FLAKE, JEFFRY | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Examples:	SP	Asset	A None	B $1-$1,000	C $1,001-$15,000	D $15,001-$50,000	E $50,001-$100,000	F $100,001-$250,000	G $250,001-$500,000	H $500,001-$1,000,000	I $1,000,001-$5,000,000	J $5,000,001-$25,000,000	K $25,000,001-$50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1-$200	III $201-$1,000	IV $1,001-$2,500	V $2,501-$5,000	VI $5,001-$15,000	VII $15,001-$50,000	VIII $50,001-$100,000	IX $100,001-$1,000,000	X $1,000,001-$5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	SP	Mega Corp. Stock					X								X																		P
		Simon & Schuster		Indefinite																	Royalties												
		1st Bank of Paducah, KY accounts						X									X									X				X			
		INTEL CORP			X																												S
		APOLLO GROUP			X																												
		RESEARCH IN MOTION			X																												P, S
		EQUITABLE MUTUAL FUND				X																											

For additional assets and unearned income, use next page.

Name FLAKE, JEFFRY | Page 4 of 5

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B ~~$1,001–$15,000~~	C $15,001–$50,000	D ~~$50,001–$100,000~~	E $100,001–$250,000	F ~~$250,001–$500,000~~	G $500,001–$1,000,000	H ~~$1,000,001–$5,000,000~~	I $5,000,001–$25,000,000	J ~~$25,000,001–$50,000,000~~	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	INTEL CORP	X	X			X									
JT	RESEARCH IN MOTION	X	X			X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	CATO INSTITUTE	FEB. 27 – MAR. 1	WASH. D.C. – NAPLES, FL – PHX	Y	N	N	N
	LEXINGTON INSTITUTE	MAR. 7 – MAR. 11	WASH. D.C. – CUBA – WASH. D.C.	Y	N	Y	N
	CITIZENS FOR A SOUND ECONOMY	JUNE 13 – JUNE 14	WASH. D.C. – NAPA VALLEY – PHX	Y	N	Y	N
	BRIGHAM YOUNG UNIVERSITY HAWAII	JULY 25 – AUG. 10	PHX – HONOLULU – PHX	Y	Y	Y	N
	COLORADO RIVER ENERGY DISTRIBUTORS ASSOCIATION	AUG. 17 – AUG. 20	PHX – PARKER, AZ – PHX	N	N	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:28
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED

Mark A. Foley
(Full Name)

104 Cannon Washington, DC 20515
(Mailing Address)

202-225-5792
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: FL District: 16	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mark A Foley	5/16/04

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Agere (Spinoff of Lucent Tech)	$1 - $1,000	CAPITAL GAINS	NONE	
	AllState	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	America Online	$1,001 - $15,000	CAPITAL GAINS	NONE	
	America Online	$1,001 - $15,000	CAPITAL GAINS	NONE	
JT	American Express (1)	$1,001 - $15,000	DIVIDENDS	$5,001 - $15,000	S
	AT&T	$1 - $1,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

	AT&T Wireless	$1 - $1,000	CAPITAL GAINS	NONE	
	Avaya	$1 - $1,000	CAPITAL GAINS	NONE	
	Banyan Hotel	$1 - $1,000	CAPITAL GAINS	NONE	
	BE Aerospace	$1 - $1,000	CAPITAL GAINS	NONE	P
	BE Aerospace	$1,001 - $15,000	CAPITAL GAINS	NONE	
JT	Cedant (1)	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Cicso Systems Inc	$1,001 - $15,000	CAPITAL GAINS	NONE	
JT	Cisco (1)	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Coca Cola	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	P
	Columbia Labs	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Corning	$1,001 - $15,000	CAPITAL GAINS	NONE	
JT	Corning (1)	None	CAPITAL GAINS	$1,001 - $2,500	S
	CVS Corp	$1,001 - $15,000	DIVIDENDS	NONE	
	Dodge & Cox Balanced Fund	$1,001 - $15,000	CAPITAL GAINS	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

	ENERI	$1 - $1,000	DIVIDENDS	NONE	
	ENERI	$1 - $1,000	DIVIDENDS	NONE	
	Fidelity Advisors BioTech Fund	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Fidelity Advisors Service VII	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Fidelity Bankshares Inc	None	CAPITAL GAINS	$2,501 - $5,000	PS
	First Union Checking	$1,001 - $15,000	INTEREST	$1 - $200	
	Fleet Boston	None	CAPITAL GAINS	$15,001 - $50,000	S
JT	Fleet Boston (1)	None	CAPITAL GAINS	$5,001 - $15,000	S
	Florida Power & Light	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Ford Motor (1)	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	
	Ford Motor Co Del	$1,001 - $15,000	CAPITAL GAINS	NONE	
	General Electric	$1,001 - $15,000	DIVIDENDS	NONE	P
	Gillette	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	GoAmerica Inc (1)	None	CAPITAL GAINS	$15,001 - $50,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

	Health Care Reit	$15,001 - $50,000	DIVIDENDS	NONE	
	Health Trac Inc	$1 - $1,000	CAPITAL GAINS	NONE	
	HealthTrack Inc	$1 - $1,000	CAPITAL GAINS	NONE	
JT	HealthTrack Inc (1)	$1 - $1,000	CAPITAL GAINS	NONE	
	Hewlett Packard	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Home Depot	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	HoneyWell Inc (1)	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Ice Web Inc	$1 - $1,000	DIVIDENDS	NONE	
	Internet Capital	$1 - $1,000	CAPITAL GAINS	NONE	
	Internet Capital	$1 - $1,000	CAPITAL GAINS	NONE	
JT	IVAX (1)	None	CAPITAL GAINS	$5,001 - $15,000	S
	Jabil Circuit Inc	$1,001 - $15,000	CAPITAL GAINS	NONE	P
	JDS Uniphase	None	CAPITAL GAINS	$1,001 - $2,500	S
JT	Johnson & Johnson (1)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

JT	JP Morgan (1)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
JT	Kroger (1) (name spelling correction from 02)	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Kroger Co	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Life Insurance	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Lucent	None	DIVIDENDS	$1,001 - $2,500	S
	McDonalds	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	McDonalds (1)	None	DIVIDENDS	$5,001 - $15,000	S
	New Visual Corp	$1 - $1,000	CAPITAL GAINS	NONE	
	Nextel	None	CAPITAL GAINS	$1,001 - $2,500	S
	Oklahoma Energy	$1 - $1,000	CAPITAL GAINS	NONE	
	Oracle Corp	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Pfizer Inc	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	PIMCO PEA Renassiance	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Providian	None	CAPITAL GAINS	$5,001 - $15,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Mark A. Foley

JT	Providian (1)	None	CAPITAL GAINS	$5,001 - $15,000	S
	Royce Fund	$1,001 - $15,000	CAPITAL GAINS	NONE	
	Safeway Inc	$1,001 - $15,000	CAPITAL GAINS	NONE	
	TECO	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	
	Televideo	$1 - $1,000	CAPITAL GAINS	NONE	
	The Street.Com	None	CAPITAL GAINS	$2,501 - $5,000	S
	Verizon	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Wachovia	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Walt Disney	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	World Com	$1 - $1,000	DIVIDENDS	NONE	
	World Comm/MCI	$1 - $1,000	DIVIDENDS	NONE	
	Wright Patman	$1,001 - $15,000	INTEREST	$1 - $200	
	Wright Patman CD changed to Money Market	$50,001 - $100,000	INTEREST	$201 - $1,000	

SCHEDULE IV - TRANSACTIONS

Name Mark A. Foley

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	BE Aerospace	P	04-07-03	$1,000
	Fidelity Bankshares Inc	PS	03-04-03 05-22-03	$1,001 - $15,000
	General Electric	P	03-13-03	$1,001 - $15,000
	Coca Cola	P	03-13-03	$1,001 - $15,000
	Ford Motor Co Del	P	03-13-03	$1,001 - $15,000
	Jabil Circuit Inc	P	04-07-03	$1,001 - $15,000
	Dodge & Cox Balanced Fund	P	07-15-03	$1,001 - $15,000
JT	American Express (1)	S	05-22-03	$1,001 - $15,000
JT	Corning (1)	S	05-22-03	$1,001 - $15,000
	Fleet Boston	S	10-31-03	$15,001 - $50,000
JT	Fleet Boston (1)	S	10-31-03	$1,001 - $15,000
	Go America	S	12-17-03	$15,001 - $50,000

SCHEDULE IV - TRANSACTIONS

Name Mark A. Foley

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	IVAX (1)	S	05-22-03	$1,001 - $15,000
	JDS Uniphase	S	03-18-03	$1,001 - $15,000
	Lucent	S	12-11-03	$1,001 - $15,000
JT	McDonalds (1)	S	05-22-03	$1,001 - $15,000
	Nextel	S	01-13-03	$1,001 - $15,000
	Providian	S	07-11-03	$1,001 - $15,000
JT	Providian	S	05-22-03	$1,001 - $15,000
	The Street.Com	S	03-31-03	$1,001 - $15,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(9)

2004 MAY 18 PM 3:26

(Office Use Only)

James Randy Forbes, Sr. (Full Name)

408 Parker Road (Mailing Address)

Chesapeake, Virginia

202-225-3181 Daytime Telephone:

Filer Status: [X] Member of the U.S. House of Representatives — State: Virginia District: 04 [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J Randy Forbes	5/15/04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Kaufman & Canales, P.C.	Spouse Salary	N/A
Gateway Bank & Trust Co. (Director's Fees)	Spouse	100.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name *James Randy Forbes, Sr.* Page *4* of *9*

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

Categories: A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000

BLOCK C — Type of Income

DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

Categories: I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	Transaction (P, S, E)
SP	Examples: Mega Corp. Stock	E ($50,001 – $100,000)	Dividends	IV ($1,001 – $2,500)	P
	Examples: Simon & Schuster	Indefinite	Royalties	IX ($100,001 – $1,000,000)	
JT	Examples: 1st Bank of Paducah, KY accounts	F ($100,001 – $250,000)	Interest	VI ($5,001 – $15,000)	
JT	524 Johnstown Rd. Ches. Va. (office Bldg.)	I ($1,000,001 – $5,000,000)	Rent	IX ($100,001 – $1,000,000)	
JT	1391 Duck Rd. Dare Co. N.C. (cottage)	H ($500,001 – $1,000,000)	Rent	VI ($5,001 – $15,000)	
SP	Great Bridge Title & Disbursement Co. Inc. (stock)	C ($1,001 – $15,000)	Dividends	VI ($5,001 – $15,000)	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James Randy Forbes, Sr.

Page 5 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	First Commonwealth Title, LLC (stock)		X					X						X				
SP	Albemarle Title, LLC							X					X					
SP	Gateway Bank & Trust (Accts)								X			X						
	Bank of America (Accts)		X						X									
	Southtrust Bank (Accts)								X			X						
	Bank of America (IRA)		X						X									
	Kaufman & Canales, PC. (Retirement Acct.)		X									X						
DC	Great Bridge Title & Disbursement Co. Inc. (Stock)							X										
DC	First Commonwealth Title, LLC (stock)		X					X										
DC	Albemarle Title (Stock)							X					X					

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SCHEDULE IV — TRANSACTIONS

Name James Randy Forbes, Sr. | Page 6 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	None														

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Name James Randy Forbes, Sr. | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Bank of America	Mortgage on 524 Johnstown Rd Chesapeake Va			X		
	Southtrust Bank	Mortgage 1391 Duck Rd Dare Co. N.C.					
	Bank of America	Mortgage 1391 Duck Rd Dare Co., N.C.		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Faith & Politics Institute	March 7 - 9	Wash, D.C. - Montgomery, Alabama	Y	Y	N	N
	American Shipbuilding Assoc.	11/30/03 - 12/04/03	Norfolk, Va. - Fort Myers Florida	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

COMMITTEES:
ARMED SERVICES
SUBCOMMITTEES
READINESS
TACTICAL AIR AND LAND FORCES

JUDICIARY
SUBCOMMITTEES
COURTS, THE INTERNET, AND INTELLECTUAL PROPERTY
CRIME, TERRORISM, AND HOMELAND SECURITY
THE CONSTITUTION

SCIENCE
SUBCOMMITTEE
SPACE AND AERONAUTICS

HAND DELIVERED

J. Randy Forbes
United States Congress
4th District, Virginia

307 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-6365

425-H SOUTH MAIN STREET
EMPORIA, VA 23847
(434) 634-5576

2903 BOULEVARD, SUITE B
COLONIAL HEIGHTS, VA 23834
(804) 526-4969

636 CEDAR ROAD, SUITE 200
CHESAPEAKE, VA 23322
(757) 382-0080

May 19, 2004

(10)

HC

2004 MAY 19 PM 4:04

The Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon HOB
Washington, D.C. 20515-6612

Re: James Randy Forbes, Sr.
Financial Disclosure Statement
Calendar Year 2003

Dear Sirs:

I am writing this letter pursuant to the phone conversation my office had with you today. I inadvertently left off one entry from the Financial Disclosure Statement for calendar year 2003. This entry should have been under Schedule V labeled "Liabilities" and should have been as follows:

Suntrust Bank ***Boat Loan*** ***Column E ($100,001 – 250,000)***

Please accept this letter as an addendum to my form.

Sincerely,

J. Randy Forbes
Member of Congress

PRINTED ON RECYCLED PAPER

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

For use by Members, officers, and employees

HAND DELIVERED

James Randy Forbes, Sr.
(Full Name)

408 Parker Road
(Mailing Address)

202-225-3181
Daytime Telephone:

2004 MAY 19 PM 4:04
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives	State: Virginia District: 04	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. Randy Forbes	5/15/04

Name James Randy Forbes Sr. | Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Kaufman & Canales, P.C.	Spouse Salary	N/A
	Gateway Bank & Trust Co. (Director's Fees)	Spouse	100.00

For payments to charity in lieu of honoraria, use Schedule II.

Name James Randy Forbes, Sr. | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

Name James Randy Forbes, Sr. Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset		A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	IX DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock		X				X										P
			Simon & Schuster	Indefinite								Royalties					X		
			1st Bank of Paducah, KY accounts							X									
JT	524 Johnstown Rd. Ches. Va. (office Bldg.)						X										X		
JT	1391 Duck Rd. Dare Co. N.C. (Cottage)														X				
SP	Great Bridge Title & Disbursement Co. INC. (stock)			X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James Randy Forbes, Sr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	First Commonwealth Title, LLC (stock)		X					X										
SP	Albemarle Title, LLC							X					X					
SP	Gateway Bank & Trust (Accts)								X									
	Bank of America (Accts)		X						X									
	Southtrust Bank (Accts)								X			X						
	Bank of America (IRA)		X						X									
	Kaufman & Canales, PC. (Retirement Acct.)		X									X						
DC	Great Bridge Title & Disbursement Co. Inc. (stock)							X										
DC	First Commonwealth Title, LLC (stock)		X					X										
DC	Albemarle Title (Stock)							X					X					

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Name James Randy Forbes, Sr. | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction								
		SALE	(MO/DAY/YR)	C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10–12–03	X				
	Neil							

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Name James Randy Forbes, Sr. | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Bank of America	Mortgage on 524 Johnstown Rd Chesapeake Va			X		
	Southtrust Bank	Mortgage 1391 Duck Rd Dare Co. N.C.					
	Bank of America	Mortgage 1391 Duck Rd Dare Co. N.C.		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 8–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	The Faith & Politics Institute	March 7 - 9	Wash, D.C. - Montgomery, Alabama	Y	Y	N	N
	American Shipbuilding Assoc.	11/30/03 - 12/04/03	Norfolk, Va. - Fort Myers Florida	Y	Y	Y	N

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 91-910 (misc)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RECORDS CENTER
2004 MAY 17 AM 11:43
(Office Use Only)
CLERK OF THE HOUSE OF REPRESENTATIVES

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

HAROLD FORD, JR.
(Full Name)

58 Rivermist Memphis, TN 38103
(Mailing Address)

(202) 225-3265
Daytime Telephone

Filer Status	[x] Member of the U.S. House of Representatives	State: Tennessee District: 9th	[ ] Officer or Employee — Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [x]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [x]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [x]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [x]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [x]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Harold Ford	5-17-04

1450

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
The Council of Insurance Agents & Brokers	Speech	2/12/03	$2,000.00
Williams Capital Group	Speech	7/11/03	$2,000.00
Milwaukee Urban League	Speech	10/23/03	$500.00
NAACP Las Vegas Branch	Speech	10/26/03	$2,000.00
Maher Live, Inc.	TV Apperance	9/11/03	$800.00

This page may be copied if more space is required.

Name HAROLD FORD, JR.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	DIVIDENDS	INTEREST	EXCEPTED TRUST	EXCEPTED BUSINESS	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock			X				X											P
DC	Simon & Schuster	Indefinite							X			Royalties					X		
JT	1st Bank of Paducah, KY accounts																		
	First Funds Growth Income Fund		X					X	X					X					
	Franklin Custodian Funds Inc							X	X										P
	Templeton Growth Fund, Inc							X	X										P
	Mutual Series Fund, Inc.							X	X										P

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
University of Pennsylvania: Fox Leadership	3/24	Memphis-Philadelphia-DC	N	N	N	N
Sparco Management	3/28-3/29	New York, NY-St. Thomas,VI-DC	Y	Y	N	N
University of Michigan: Gerald Ford School of Public Policy Commencement	4/25-4/26	Memphis-Detroit-DC	Y	Y	N	N
University of Tennessee-Knoxville Commencement	5/9-5/10	DC-Knoxville-Orlando	Y	N	N	Y-travel (airline ticket) was not a Sponsor expense, only lodging
NYU Graduate School of Public Service Commencement	5/12-5/13	Orlando-New York, NY-DC	Y	N	N	N
Meharry Medical College Commencement	5/17	Memphis-Nashville-Memphis	N	N	N	N
Williams Capital Group; Corporate and Institutional Investor Golf Tournament	7/10-7/11	DC-Chicago-Memphis	Y	N	N	N
National Bar Association	8/5-8/6	DC-New Orleans-Memphis	Y	N	N	N
Tennessee Trucking Association	9/21-9/22	Jacksonville, FL-Destin-DC	Y	Y	N	N
Northern Oakland County NAACP	10/10-10/11	Memphis-Detroit-Knoxville	Y	N	N	N
Milwaukee Urban League	10/22-10/23	Memphis-Milwaukee-Memphis	Y	Y	N	N
NAACP Las Vagas Branch	10/25-10/26	Memphis-Las Vegas-Memphis	Y	N	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 2:20
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED MC
(Office Use Only)

Vito John Fossella
(Full Name)
15 Grandview Terrace
Staten Island, NY 10308
(Mailing Address)
Daytime Telephone (718) 356-8400

Filer Status	☑ Member of the U.S. House of Representatives — State: NY District: 13	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/13/04

1454

Name Vito John Fossella | Page 3 of 3

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
Sons of Italy	Speech	June 27, 2003	$500

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Name Vito John Fossella | Page 2 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

				A	B	C	D	E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI		
				None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X								X																				P
			Simon & Schuster			Indefinite																Royalties									X					
			1st Bank of Paducah, KY accounts						X									X																		
JT	Chase Manhattan Bank Acct					X												X						X												
DC	Chase Manhattan Bank A'cct					X												X						X												
DC	Chase Manhattan Bank A'cct					X												X						X												
	NYC Deferred Comp						X									X									X											
SP	Chase Manhattan IRA							X										X						X												
	Pressl II Lynch Global Value Fund class B					X										X								X												

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	NASDAQ	3/29-3/31/02	New York-Miami-Nashville	Y	Y	N	N

This page may be copied if more space is required.

District Offices:
4434 Amboy Road, 2nd Floor
Staten Island, NY 10312
(718) 356-8400
(718) 356-1928 (Fax)

9818 Fourth Avenue
Brooklyn, NY 11209
(718) 630-5277
(718) 630-5388 (Fax)

Congress of the United States
House of Representatives
Vito Fossella
13th District, New York

Capitol Office:
1239 Longworth House Office Building
Washington, DC 20515-3213
(202) 225-3371
(202) 226-1272 (Fax)
E-mail Address:
vito.fossella@mail.house.gov

May 12, 2004

The Honorable Joel Hefley
Chairman,
Committee on Standards of Official Conduct
HT-2
The Capitol
Washington, DC 20515-6328

Dear Chairman Hefley:

On June 27, 2003, I gave a speech to the Sons of Italy, as their Man of the Year. As part of that event, the Sons of Italy donated in lieu of charity, $500 to the American Diabetes Association Camp Independence Scholarship Fund.

This charitable donation is reflected in page one of my Financial Disclosure statement for 2003.

If you should have any questions, please do not hesitate to contact me.

Sincerely,

Vito J. Fossella
Member of Congress

PRINTED ON RECYCLED PAPER

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 9
For use by Members, officers, and employees

2004 MAY 14 AM 11:22

HAND DELIVERED MC
(Office Use Only)

U. S. Rep. Barney Frank
(Full Name)

2252 Rayburn Bldg. Washington, DC 20515
(Mailing Address)

202-225-5931
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: MA District: 4	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 14, 2004

1459

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name U. S. Rep. Barney Frank

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
TIAA-CREF Retirement Account	$15,001 - $50,000	None	NONE	NA
McGraw-Hill Publishing Co. (Hightstown, NJ)	Indefinite	Royalties	$1 - $200	NA
Citizens Bank savins & checking accounts	$15,001 - $50,000	INTEREST	$1 - $200	NA
4 Percent Interest in Breadline Restaurant (Washington, DC)	$15,001 - $50,000	None	NONE	NA
1401 17th Street, NW, Washington, DC (personal residence)	$250,001 - $500,000	None	NONE	NA
Salomon Smith Barney Brokerage Acct. -- Money Fund	$1 - $1,000	DIVIDENDS	$1 - $200	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name U. S. Rep. Barney Frank

	Centennial Money Market Trust (IRA)	$1,001 - $15,000	INTEREST	$1 - $200	NA
	Liberty Funds Trust II (IRA)	$1,001 - $15,000	CAPITAL GAINS	$201 - $1,000	S
	Pilgrim Mutual Funds Large Capital Growth Fund (IRA)	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	S
	UTS Nuveen Dow Portfolio	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	NA
	UTS Nuveen Nasdaq 100 Index (IRA)	$1,001 - $15,000	CAPITAL GAINS	$1 - $200	S
	Mass. Investors Growth Stock Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	NA
	Mass. Housing Finance Agency (bonds)	$1,001 - $15,000	INTEREST	$201 - $1,000	NA
	Mass. Industrial Finance Agency (bonds)	$1,001 - $15,000	INTEREST	$201 - $1,000	NA
	Mass. State bonds consolidated loan	$15,001 - $50,000	INTEREST	$201 - $1,000	NA
	Smith Barney Social Awareness Fund	$50,001 - $100,000	CAPITAL GAINS/DIVIDENDS	$1,001 - $2,500	NA
	Calvert Social Investment Fund	$50,001 - $100,000	CAPITAL GAINS/DIVIDENDS	$1,001 - $2,500	NA
	Univ. Of Mass. Bldg. Authority	$15,001 - $50,000	INTEREST	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name U. S. Rep. Barney Frank

	Mass. Turnpike Authority bonds (Note that these bonds were originally purchased in 1999, and inadvertently left off my Financial Disclosure Statements for 1999 - 2003. See attached letter amending those statements.)	$15,001 - $50,000	INTEREST	$201 - $1,000	NA

SCHEDULE IV - TRANSACTIONS

Name U. S. Rep. Barney Frank

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Liberty Funds Trust II (IRA)	S	8-6-03	$1,001 - $15,000
	Pilgrim Mutual Funds Large Capital Growth Fund (IRA)	S	9-15-03	$15,001 - $50,000
	UTS Nuveen Nasdaq 100 Index (IRA)	S	9-15-03	$1,001 - $15,000
	Univ. Of Mass. Bldg. Authority (bonds)	P	7-31-03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name U. S. Rep. Barney Frank

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Flagstar Bank (Bingham Frams, MI)	Mortgage on 1401 17th Street, NW, Washington, DC (personal residence)	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name U. S. Rep. Barney Frank

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Institute of Intl. Bankers (New York)	Jan. 16	Wash., -- New York -- Wash.	N	N	N	NA
El Paso Stonewall	Feb. 8 - 9	Dallas -- El Paso -- Phoenix (DC -- Dallas paid w/ personal funds)	Y	N	N	NA
Arizona Citizen Action	Feb. 9 - 10	Phoenix -- Wash.	Y	N	N	NA
American Bankers Assn.	Feb. 22 - 24	Boston -- Miami -- Wash.	Y	Y	N	NA
New York Stock Exchange	March 13 - 14	Wash. -- New York -- Wash.	Y	N	N	NA
Also Out Youth/PFLAG	March 22 - 23	Boston -- Sarasota	Y	N	N	NA
COMPASS (W. Palm Beach)	March 23 - 24	Sarasota -- W. Palm Beach -- Wash.	Y	N	N	NA
S. Carolina Equality Coalition	April 5 - 6	Wash. -- Charleston -- Wash.	N	N	N	NA
Northeast Valley Democratic Committee (Arizona)	June 7 - 8	Wash. -- Phoenix	Y	N	N	NA
Four Freedoms Democratic Club (Kansas City)	June 8 - 9	Phoenix -- Kansas City -- Wash.	Y	N	N	NA

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name U. S. Rep. Barney Frank

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Jewish Center of the Hamptons	July 26 - 28	Washington --Islip, NY -- Easthampton, NY -- Boston	N	N	N	NA
United Nations GLOBE	August 4 - 5	Boston -- New York -- Wash.	Y	N	N	NA
Citizen Action Illinois	August 26 - 27	Boston -- Chicago -- New York (travel from N.Y. Paid by Barney Frank for Congress)	Y	N	N	NA
Mass. Municipal Assn.	Sept. 19	Hartford -- Amherst, MA -- Newton, MA (Wash. -- Hartford paid by official Congressional funds)	N	N	N	NA
ACLU of Colorado	Sept. 20 - 21	Boston -- Denver -- Boston	Y	N	N	NA
Paul Scoles for County Council Committee	Oct. 10 - 11	Wash. -- Philadelphia -- New York (return trip to Wash. Paid w/ personal funds)	N	N	N	1
Chicago Mercantile Exchange/ Chicago Board Options Exchange; Chicago Board of Trade	Oct. 26 - 27	Wash. -- Chicago -- Boston	N	N	N	NA

BARNEY FRANK
4TH DISTRICT, MASSACHUSETTS

2252 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-2104
(202) 225-5931

29 CRAFTS STREET
SUITE 375
NEWTON, MA 02458
(617) 332-3920

Congress of the United States
House of Representatives
Washington, DC

558 PLEASANT STREET
ROOM 309
NEW BEDFORD, MA 02740
(508) 999-6462

THE JONES BUILDING
29 BROADWAY
SUITE 310
TAUNTON, MA 02780
(508) 822-4796

May 14, 2003

The Honorable Jeff Trandahl
Clerk
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Trandahl:

In preparing my Financial Disclosure Statement for the year 2003, I became aware of the fact that I inadvertently omitted from my statements for the years 1999 – 2002 one item that should have been listed in Schedule III. I am writing today to request that those statements be amended as described below.

On March 15, 1999, I purchased a total of $20,000 in Massachusetts Turnpike Authority bonds. This purchase should have been listed on Schedule IV of my 1999 statement. In addition, the 1999 statement and each of the succeeding annual statements should have included an entry in Schedule III for Massachusetts Turnpike Authority bonds with a year-end asset value in the $15,001 - $50,000 category, and interest income in the $201 - $1,000 category.

If any more information is required, please notify me so I can supply it.

BARNEY FRANK

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
TO
LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 1:24
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

MC

TRENT FRANKS
(Full Name)
12416 N. 57th DRIVE
(Mailing Address)
Glendale, AZ 85304
Daytime Telephone: 623-487-9587

Filer Status	☐ Member of the U.S. House of Representatives — State: District:	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Trent Franks	May 11, 2004

Name TRENT FRANKS | Page 1 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500

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Name TRENT FRANKS | Page 3 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A Asset and/or Income Source		BLOCK B Value of Asset	BLOCK C Type of Income					BLOCK D Amount of Income									BLOCK E Transaction
			A None	B [illegible]	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L [illegible]	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II [illegible]	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VI [illegible]	VII $15,001 – $50,000	VIII [illegible]	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X																			P
			Simon & Schuster		Indefinite																Royalties									X				
			1st Bank of Paducah KY accounts					X									X																	
	NOTE PAYABLE FROM PROVIDENCE PETROLEUM FOR LIBERTY PETROLEUM STOCK TRANSFER										X								X															
	Providence Petroleum Stock										X								X															
	NOTE PAYABLE FROM LIBERTY PETROLEUM FOR STRATEGIC CONSULTING AND ADMINISTRATION																		X											X				
	STOCK PURCHASE							X											X															

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name TRENT FRANKS

Page 4 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,001; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	
	US PATENTS FOR LIPOSOME LIFE PRESERVER	E			
	VIREX CORPORATION STOCK	F			
	Residence	F			

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SCHEDULE IV — TRANSACTIONS

Name TRENT FRANKS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: [illegible]	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: [illegible]	C $15,001–$50,000	[illegible]	E $100,001–$250,000	F [illegible]	G $500,001–$1,000,000	[illegible]	I $5,000,001–$25,000,000	[illegible]	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X					
	FAIRBANKS CAPITAL CORP. JACKSONVILLE, FL	MORTGAGE ON 7736 N. 30TH DR. PHOENIX, AZ				X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	JUBILEE CAMPAIGN	1/9/04 1/15/04	AMMAN, JORDAN - BOMBAY, INDIA BOMBAY, INDIA - WASHINGTON, DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Strategic Consulting & Administration Inc.
Director	Liberty Petroleum Corporation
Director	Providence Petroleum Corporation
Board member	Arizona Student Tuition Organization Association
Representative	Operation Smile
Board member	Americans for Military Readiness

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
11-7-03	Trent Franks & Liberty Petroleum Corp.	Deferred compensation agreement totaling $110,000.00.

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Arizona Association of Evangelicals
Board Member	Heart Line Ministries
Board Member	Arizona Dream Foundation
Board Member	Childrens Hope Scholarship Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

2004 MAY 21 PM 1:41

U.S. HOUSE OF REPRESENTATIVES

MC

TRENT FRANKS
(Full Name)

(Mailing Address) Daytime Telephone:

Filer Status	☒ Member of the U.S. House of Representatives State: District:	☐ Officer or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☒ Amendment	☐ Termination Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☐
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☐

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Trent Franks	5-20-2004

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Name TRENT FRANKS | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A			BLOCK B											BLOCK C						BLOCK D											BLOCK E
				A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	FUND INCOME	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock					X								X																P
			Simon & Schuster			Indefinite															Royalties									X		
			1st Bank of Paducah, KY accounts															X														
	Home on 7726 N. 30th Dr Phoenix AZ								X							X										X						

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

37

MC 2004 MAY 14 PM 1:31

(Office Use Only)

Rodney P. Frelinghuysen
(Full Name)

559 James Street
(Mailing Address)

Morristown, New Jersey

(908)439-3499 (Tina)
Daytime Telephone

(202)225-5034 (Rodney)

Filer Status	[X] Member of the U.S. House of Representatives	State: New Jersey District: 11	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	R.P. Frelinghuysen	5/13/04

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N O N E		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
NONE			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rodney P. Frelinghuysen

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset										BLOCK C Type of Income					BLOCK D Amount of Income											BLOCK E Transaction
		A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000		DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	I None	II $201 – $1,000	III	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000		P, S, E
	See Continuation Sheets Page 5 thru 26																				

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ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	2003 INCOME	2003 TRANSACTION
Johnson & Johnson	H	DIV	VII	
Pall Corp.	F	DIV	V	DIV REINVEST.
Peapack Gladstone Financial Corp.	F	DIV	IV	
Fleet Boston Financial (Formerly, Summit Bancorp., NJ)	F	DIV	VI	
Valley National Bancorp - NJ	C	DIV	II	
Procter & Gamble Co.	I	DIV	VIII	DIV REINVEST.
International Business Machines	I	DIV	VI	DIV REINVEST.
Eli Lilly & Co.	I	DIV	VII	DIV REINVEST.
Computer Technology (IRA)	C	NONE	I	
Peapack Gladstone Bank (CKG)	F	INT	III	
JP Morgan Chase Bank (SVGS) (Formerly, Chase Manhattan(SVGS))	D	INT	II	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	2003 INCOME	2003 TRANSACTION
Congressional Federal Credit Union	C	INT	I	
Aetna, Inc. NEW	D	DIV	II	
Merck & Co., Inc.	G	DIV	VI	
Pfizer, Inc.	H	DIV	VI	
CATS - PRIN - Ser K	A	OID INT	I	S
CATS - PRIN - Ser M	A	OID INT	I	S
CATS - PRIN - Ser Q	C	OID INT	III	
Federated U.S. Government	G	INT	IV	
Motorola, Inc.	D	DIV	III	
Intel Corp.	E	DIV	II	
American Express	E	DIV	III	
Schering Plough Corp.	C	DIV	III	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

ASSETS	YEAR-END VALUE	INCOME TYPE	2003 INCOME	2003 TRANSACTION
Microsoft Corp.	C	DIV	II	
Fleet Bank - Svgs (Formerly Summit Bank)	C	INT	II	
JP Morgan Funds	C	DIV	II	
J.M. Smucker Co.	D	DIV	III	DIV. RE-INVEST
Great Hall Investment Fund (IRA)	C	DIV	II	
Medco Health Solutions, Inc.	D	NONE	I	Spin-off
17.923 Acres unimproved land, Frelinghuysen Twp., NJ (Commercial Value 2/26/97)	F			
1/5th undivided interest in 235.8 acres of unimproved land, Stockbridge, Ma. (Est.Value)	E			

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Marital Trust U/W Rodney Procter, Peter H. B. Frelinghuysen, Trustee (1/10th income interest)*

* All Assets are held in trust, and all transactions are initiated by the Trustee

The trust was not created directly by Rodney, his spouse or any dependents.

They are neither consulted nor give advice regarding these investments.

Neither Rodney, his spouse or any dependents receives monthly, quarterly, yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

2003 Income received V

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Non-Marital Trust U/W Rodney Procter, Peter H. B. Frelinghuysen, Trustee (1/10th income interest)*

* All Assets are held in trust, and all transactions are initiated by the Trustee

The trust was not created directly by Rodney, his spouse or any dependents.

They are neither consulted nor give advice regarding these investments.

Neither Rodney, his spouse or any dependents receives monthly, quarterly, yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

2003 Income received IX

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : A.H. Frelinghuysen 1950 Trust,
Peter H. B. Frelinghuysen, Trustee
(1/5 income interest)*

* All Assets are held in trust, and all transactions are initiated by the Trustee

The trust was not created directly by Rodney, his spouse or any dependents.

They are neither consulted nor give advice regarding these investments.

Neither Rodney, his spouse or any dependents receives monthly, quarterly, yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

2003 Income received VII

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : Peter H.B. Frelinghuysen Trust U/D dated 1/17/57, Peter H.B. Frelinghuysen and George L. K. Frelinghuysen, Trustees (1/8th income interest)*

* All Assets are held in trust, and all transactions are initiated by the Trustee

The trust was not created directly by Rodney, his spouse or any dependents.

They are neither consulted nor give advice regarding these investments.

Neither Rodney, his spouse or any dependents receives monthly, quarterly, yearly reports of any type regarding this trust, excepting the Yearly K-1. Therefore, it qualifies as an Excepted Trust.

2003 Income Received VI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. P. Frelinghuysen Trust U/A
4/3/73 Deutsche Bank, New York, NY
Trustee (discretionary income interest)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Knight Ridder, Inc.	E	DIV	
Merck & Co., Inc.	F	DIV	
Procter & Gamble Co.	I	DIV	
Deutsche Bank Trust Co. Tax Free Income Fund (Formrly,Banker's Trust Co. Tax Free Income Fund)	F	DIV	
Deutsche Bank Trust Money Market Account (Formerly, Banker's Trust Money Market Account)	E	INT	S
American International Group	D	DIV	
Cisco Systems, Inc.	C	NONE	

* All Assets listed are held in trust, and all transactions are initiated by the Trustee. Neither Rodney, his spouse or any dependents is consulted nor gives advice regarding these investments. However, Rodney does receive quarterly statements regarding this trust.

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Intel Corp.	C	DIV	
American Express Co.	D	DIV	
Microsoft Corp.	C	DIV	
Pfizer	E	DIV	
Home Depot	C	DIV	
Comcast Corp. CL 'A'	C	NONE	
Eli Lilly & Co.	C	DIV	
CitiGroup, Inc.	C	DIV	
Fleet Boston Financial Corp.	C	DIV	
Texas Instruments, Inc.	C	DIV	
General Electric Co.	C	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Noble Drilling Corp.	C	NONE	
J.M. Smucker Co.	C	DIV	
Medco Health Solutions	D	NONE	Spin-Off
2003 Income Received		VII	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Abbott Laboratories	F	DIV	
Bristol Myers Squibb Co.	F	DIV	
IMS Health, Inc.	D	DIV	
Moody's Corp. (Formerly Dun & Bradstreet Corp.)	D	DIV	
R.H. Donnelley Corp.	C	NONE	
Gannett Co., Inc.	E	DIV	
H. J. Heinz Company	D	DIV	
Pepsico, Inc.	F	DIV	
Procter & Gamble Co.	J	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Electronic Data System Corp.	C	DIV	
Loews Corp.	F	DIV	
Motorola, Inc.	E	DIV	
CSX Corporation	D	DIV	
A T & T Corporation	C	DIV	
Lucent Technologies, Inc.	C	NONE	
SBC Communications	D	DIV	
Money Market Fund	H	INT	P
American Express Co.	E	DIV	
Rohm & Haas Co.	D	DIV	
McGraw-Hill Cos., Inc.	E	DIV	
Sherwin Williams Co.	E	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Neiman-Marcus Group CL 'B'	C	NONE	
Citigroup, Inc.	D	DIV	
Dun & Bradstreet Corp., NEW	C	NONE	
AT&T Wireless	C	NONE	
Zimmer Holdings, Inc.	D	NONE	
Smucker, J.M. Co.	E	DIV	
DelMonte Foods Co.	C	NONE	
Comcast Corp. New CL'A'	C	NONE	
2003 Income Received		IX	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : V. T. Robinson Trust U/A dated 4/10/80, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income interest)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
U. S. Treasury Notes	A	INT	REDEEMED
Passaic Cty NJ Ref - Gen Imp	E	INT	
New Jersey St. Trans. Tr. Fd Auth. Bond	F	INT	
Newark, NJ Sch. Qualified Bond	F	INT	
Port Auth. NY & NJ Cons.	F	INT	
Deptford Twp.NJ School District	F	INT	
Home Depot, Inc.	F	DIV	

* All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Spouse does receive quarterly statements regarding this trust.

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Coca Cola Co.	F	DIV	
General Mills	E	DIV	
Pepsico, Inc.	F	DIV	
Altria Group, Inc. (Name Change: (Formerly Phillip Morris Cos., Inc.)	F	DIV	
Procter & Gamble Co.	D	DIV	
Bristol Myers Squibb Co.	D	DIV	
Merck & Co., Inc.	F	DIV	S
Pfizer, Inc.	G	DIV	S
Schering Plough Corp.	A	DIV	S
Aetna, Inc., NEW	E	DIV	
American Int'l Group	E	DIV	P

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Electronic Data Systems Corp.	A	DIV	S
General Electric Co.	G	DIV	S
Emerson Electric Co.	E	DIV	
Parker - Hannifin Corp.	F	DIV	
Hewlett - Packard	F	DIV	
Intel Corp.	D	DIV	S
International Business Machines	D	DIV	
Microsoft Corp.	G	DIV	S
Motorola, Inc.	A	DIV	S
BP PLC Sponsored ADR (Name Changed - Formerly, B P Amoco, PLC ADR)	F	DIV	
Exxon Mobil Corp	F	DIV	
Royal Dutch Petroleum Co.	E	DIV	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Union Pacific Corp.	E	DIV	
Anadarko Petroleum Corp.	D	DIV	
Bank One Corp.	D	DIV	
Federal Nat'l Mortgage Assn.	D	DIV	S
Scudder Tax Free Money Market	H	INT	P
Corn Products Intn'l	A	DIV	S
Bergen Cty NJ Ref -Gen. Imp	F	INT	
Nokia Corp. ADR	D	DIV	
Zimmer Holdings, Inc.	C	NONE	
Oakmark Int'l Fund CL'I'	F	DIV	
Yum Brands, Inc.	D	NONE	

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ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Equity Residential SH Ben Int.	D	DIV	P
Public Storage, Inc.	D	DIV	P
Regency Centers Corp.	D	DIV	P
Simon Property Group, Inc. (new)	D	DIV	P
Wells Fargo & Co. (new)	F	DIV	P
Johnson & Johnson	E	DIV	P
Medco Health Solutions, Inc.	C	NONE	Spin-Off
Alcoa, Inc.	E	DIV	P
2003 Income Received		IX	

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE III

Identity : H. S. Robinson Trust U/A dated 12/16/82, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income beneficiary)*

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Bank One Corp.	E	DIV	
Coca Cola Co.	E	DIV	
General Mills	E	DIV	
Altria Group, Inc. (Name Change: Formerly Phillip Morris Cos., Inc.)	F	DIV	
Abbott Labs	E	DIV	
Merck & Co., Inc.	D	DIV	S

* All Assets listed are held in trust, and all transactions are initiated by the Trustee

Rodney P. Frelinghuysen is neither consulted nor gives advise regarding these investments.

Spouse does receive quarterly statements regarding this trust.

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Johnson & Johnson	F	DIV	
AT & T Wireless Services, Inc. (Formerly, AT & T Corp.)	A	NONE	S
Bell South Corp.	F	DIV	
American Int'l Group	F	DIV	
Electronic Data Systems Corp.	D	DIV	
Emerson Electric	E	DIV	
General Electric Co.	F	DIV	S
Parker - Hannifin Corp.	F	DIV	
Hewlett - Packard	E	DIV	
Intel Corp.	E	DIV	S
Microsoft Corp.	F	DIV	S
Motorola, Inc.	A	DIV	S

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
Exxon Mobil Corp.	F	DIV	S
Royal Dutch Petroleum	F	DIV	
Federal Nat'l Mortgage Assn.	E	DIV	
Pfizer, Inc.	G	DIV	S
First Data Corp.	E	DIV	
Montclair NJ Gen. Oblig.	E	INT	
Newark NJ Sch. Qualified Bond	E	INT	
Scudder Tax Free Money Market	G	INT	P
Burlington Cty NJ OID	F	INT	
NJ St. EDL FACS ATH REV Princeton Univ.	F	INT	
AOL Time Warner (Formerly, Time-Warner, Inc.)	A	NONE	S

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET

HOLDINGS	YEAR-END VALUATION	INCOME TYPE	2003 TRANSACTION
EMC Corp. (MA)	A	NONE	S
Nokia Corp ADR	D	DIV	
Templeton Emerging Mkts Fund	A	DIV	S
Agere Systems, Inc. CL'A'	A	NONE	S
Agere Systems, Inc. CL'B'	A	NONE	S
Gannett Co.	E	DIV	P
Anadarko Petroleum Corp.	E	DIV	P
Wells Fargo & Co. (new)	E	DIV	P
Medco Health Solutions, Inc.	C	NONE	Spin-Off
Avery Dennison Corp.	E	DIV	P
Alcoa, Inc.	F	DIV	P
SBC Communications, Inc.	E	DIV	P
2003 Income Received		VIII	

SCHEDULE IV — TRANSACTIONS

Name Rodney P. Frelinghuysen

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	See Continuation sheets														
	pages 28 thru 34														

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ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Qtrly. Div. Re-Invest.	Pall Corporation	P	B
Qtrly. Div. Re-Invest.	Procter & Gamble	P	D
Qtrly. Div. Re-Invest.	International Business Machines	P	B
Qtrly. Div. Re-Invest.	Eli Lilly & Co.	P	C
Qtrly. Div. Re-Invest.	J.M. Smucker Co.	P	Under $1,000
Various	Federated U.S. Government	P	D
08/22/03	Medco Health Solutions (Spin-Off from Merck & Co., Inc.)	Spin-Off	B
11/15/03	CATS - PRIN - SER K	S	B
11/15/03	CATS - PRIN - SER M	S	C

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : B. P. Frelinghuysen Trust U/A
4/3/73 Deutsche Bank, New York, NY
Trustee (discretionary income interest)*

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Various	Deutsche Bank Trust Money Market Acct	S	C
08/23/2003	Medco Health Solutions	Spin-Off	Under $1,000

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : B. S. Procter Trust U/A
5/31/60 F/B/O Rodney P. Frelinghuysen
Peter Frelinghuysen & Rodney P. Frelinghuysen, Trustees

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Various	Money Market Fund	P	D

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : V. T. Robinson Trust U/A dated 4/10/80, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income interest)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Various	Scudder Tax Free Money Market	P	D
02/18/03	U.S. Treasury Notes	Redeemed	D
07/10/03	Motorola, Inc.	S	C
08/19/03	Corn Products Int'l	S	B
08/19/03	Federal Nat'l Mortgage	S	C
08/19/03	Merck & Co.	S	C
08/19/03	Electronic Data Systems	S	C
08/19/03	General Electric Co.	S	C
08/19/03	Intel corp.	S	C
08/19/03	Microsoft Corp.	S	D

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : V. T. Robinson Trust U/A dated 4/10/80, Fiduciary Trust Company, Boston, Ma. Trustee (spouse discretionary income interest)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
08/19/03	Pfizer, Inc.	S	D
08/19/03	Schering-Plough Corp.	S	C
08/19/03	American Int'l Group	P	D
08/19/03	Wells Fargo & Co. (new)	P	D
08/19/03	Johnson & Johnson	P	D
08/19/03	Alcoa, Inc.	P	D
08/19/03	Equity Residential SJ Ben Int	P	C
08/19/03	Simon Property Group, Inc. (new)	P	C
08/19/03	Public Storage, Inc.	P	C
08/19/03	Regency Centers Corp.	P	C
08/21/03	Medco Health Solutions, Inc.	Spin-Off	B

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : H. S. Robinson Trust U/A dated 12/16/82, Fiduciary Trust Company, Boston, Ma. Trustee (Spouse discretionary income beneficiary)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
Various	Scudder Tax Free Money Market	P	D
05/02/03	AOL Time Warner	S	B
05/02/03	General Electric Co.	S	B
05/02/03	Merck & Co., Inc.	S	D
05/02/03	Pfizer, Inc.	S	D
05/02/03	Intel Corp.	S	C
05/02/03	Microsoft Corp.	S	D
05/02/03	Templeton Emurging Markets Fund	S	B
05/02/03	Agere Systems, Inc. CL B	S	Under $1,000
05/02/03	Exxon Mobil Corp.	S	B
05/02/03	AT&T Wireless Services, Inc.	S	B

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT

RODNEY P. FRELINGHUYSEN

CONTINUATION SHEET - SCHEDULE IV

Identity : H. S. Robinson Trust U/A dated 12/16/82, Fiduciary Trust Company, Boston, Ma. Trustee (Spouse discretionary income beneficiary)

DATE	ASSET	TYPE OF TRANSACTION	AMOUNT OF TRANSACTION
05/02/03	Wells Fargo & Co. (new)	P	D
05/02/03	Avery Dennison Corp.	P	D
05/02/03	Alcoa, Inc.	P	D
05/02/03	Gannett Co.	P	C
05/02/03	Anadarko Petroleum Corp.	P	C
05/02/03	SBC Communications Inc.	P	D
05/05/03	Agere Systems, Inc. CL A	S	Under $1,000
06/06/03	EMC Corp.	S	B
07/10/03	Motorola, Inc.	S	C
08/21/03	Medco Health Systems, Inc.	Spin-off	Under $1,000
09/02/03	Intel Corp.	S	C

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X					
	NONE										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 8–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Public Governance Institute	Feb 28 - Mar. 2	Wash.,D.C.-West Virginia-Wash.DC 'Congressional Retreat'	Y	N	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Advisory Board	El Primer, LTD Morristown, NJ

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page 1 of 1

HAND DELIVERED

15

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U.S. HOUSE OF REPRESENTATIVES

Martin Frost
(Full Name)

2256 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-36805
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative	State: TX District: 24	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☑ No ☐	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		4/20/04

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SCHEDULE I - EARNED INCOME

Name Martin Frost

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
US Army	Spouse Salary	N/A

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Martin Frost

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
The Connell Company	Speech	Feb. 7, 2003	$2,000
The John G. Tower Center for Political Studies Southern Methodist University	Speech	April 22, 2003	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Frost

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Home Depot Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
American Electric Power Stock	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
Eli Lily Stock	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
Exxon Mobil Stock	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
Walmart Stock (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Treasury CATS (IRA)	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Frost

	Cisco Stock (IRA)	$1,001 - $15,000	None	NONE	
	Walmart Stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Investment Company of America (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	General Electric Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	2535 Wedglea Dallas, TX	$15,001 - $50,000	RENT	$2,501 - $5,000	
	Thrift Savings	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Wright Patman Federal Credit Union Checking Account	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Wright Patman Federal Credit Union -- Checking Account	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Wright Patman Federal Credit Union Savings Account	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	PFCU Checking Account	$50,001 - $100,000	INTEREST	$201 - $1,000	
SP	PFCU Savings Acount	$50,001 - $100,000	INTEREST	$2,501 - $5,000	
SP	PFCU-IRA Accounts (2)	$1,001 - $15,000	INTEREST	$1 - $200	
SP	First Federal Savings	$100,001 - $250,000	INTEREST	$1,001 - $2,500	
SP	Bell South Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Frost

SP	Progress Energy Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Fidelity Contra Fund (IRA)	$100,001 - $250,000	DIVIDENDS	$1 - $200	
SP	Oppenheimer Convertible Bond Fund	None	CAPITAL GAINS	$201 - $1,000	S
SP	US Savings Bonds	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	First Financial Holding Stock	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	First Citizens Bank (IRA)	None	INTEREST	$201 - $1,000	E
SP	Fidelity Investment Equity Income Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	AAFES FCU Savings	None	INTEREST	$201 - $1,000	E
SP	1/2 interest in 70 acres of cleared/cut pines, Latta, SC	$15,001 - $50,000	RENT	$1,001 - $2,500	
SP	1/2 inerest in 100 acres of clear cut pines, Latta, SC	$15,001 - $50,000	None	NONE	
SP	Sonoco Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Southtrust Corp Stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
SP	Arlington, VA Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Fairfax City Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Martin Frost

SP	Thrift Savings	$1,001 - $15,000	INTEREST	$1 - $200	
SP	Blackrock Inc OPP Trust	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
SP	ING Prime Rate Trust	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	MFS Multi Market Income Trust	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	Managed High Income Portfolio	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
SP	Managed Muni Portfolio	$15,001 - $50,000	None	NONE	P
SP	Investment Company of America Fund	$50,001 - $100,000	CAPITAL GAINS	$1,001 - $2,500	P
SP	MFS Total Return Fund-A	$50,001 - $100,000	DIVIDENDS	$1 - $200	P
SP	MFS Total Return Fund-B	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	P
SP	Smith Barney Appreciation Fund A	$50,001 - $100,000	DIVIDENDS	$1 - $200	P
SP	Smith Barney Agressive Growth-A (IRA)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Franklin Utilities Fund	None	DIVIDENDS	$201 - $1,000	S
SP	MFS Total Return Fund	None	DIVIDENDS	$201 - $1,000	S

SCHEDULE IV - TRANSACTIONS

Name Martin Frost

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	AOL Time Warner Stock	S	7/30/03	$1,001 - $15,000
SP	Blackrock Inc. Opp. Fund	P	9/26/03	$15,001 - $50,000
SP	ING Prime Rate Trust	P	9/26/03	$15,001 - $50,000
SP	MFS Multi Market Income Trust	P	9/26/03	$15,001 - $50,000
SP	Managed High Income Portfolio	P	9/26/03	$15,001 - $50,000
SP	Managed Muni Portfolio	P	9/26/03	$15,001 - $50,000
SP	Investment Company of America Fund	P	10/31/03	$50,001 - $100,000
SP	MFS Total Return Funds - A	P	10/31/03	$50,001 - $100,000
SP	MFS Total Return Fund - B	P	0/27/03	$15,001 - $50,000
SP	Smith Barney Appreciation Fund - A	P	10/31/03	$50,001 - $100,000
SP	Smith Barney Agressive Growth A	P	12/02/03	$1,001 - $15,000
SP	Chevron Texaco Stock	S	10/13/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Martin Frost

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	AT&T Stock	S	10/08/03	$1,001 - $15,000
SP	Comcast Stock	S	10/08/03	$1,001 - $15,000
SP	General Electric Company Stock	S	10/10/03	$15,001 - $50,000
SP	Smith Barney Div. & Inc Fund	S	10/27/03	$1,001 - $15,000
SP	USAA Stock Fund	S	10/27/03	$1,001 - $15,000
SP	American Express Grown Fund	S	10/03/03	$1,001 - $15,000
SP	Daimler Chrysler Stock	S	10/27/03	$1,001 - $15,000
SP	Oppenheimer Bond Fund	S	10/27/03	$1,001 - $15,000
SP	Franklin Utilities Fund	S	10/30/03	$1,001 - $15,000
SP	Fidelity Blue Chip Fund	S	10/30/03	$15,001 - $50,000
SP	Fidelity Emerging Markets Fund	S	10/30/03	$1,001 - $15,000
SP	Scudder Global Fund	S	10/28/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Martin Frost

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	AIM Constellation Fund	S	10/23/03	$1,001 - $15,000
SP	Aim Dent Demographics Fund	S	10/23003	$1,001 - $15,000
SP	Aim Large Cap Growth Fund	S	10/23/03	$1,001 - $15,000
SP	AIM Opportunities Fund	S	10/23/03	$1,001 - $15,000
SP	MFS Capital Opportunities Fund	S	10/23/03	$1,001 - $15,000
SP	MFS Emerging Growth Fund	S	10/23/03	$1,001 - $15,000
SP	MFS Mass Investment Growth Fund	S	10/23/03	$1,001 - $15,000
SP	MFS Mid Cap Growth Fund	S	10/23/03	$1,001 - $15,000
SP	Putnam Discovery Fund	S	10/23/03	$15,001 - $50,000
SP	Putnam Growth Fund	S	10/23/03	$1,001 - $15,000
SP	Putnam Health Sciences Fund	S	10/23/03	$1,001 - $15,000
SP	Putnam Investors CL B Fund	S	10/23/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Martin Frost

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Putnam New Opportunities Fund	S	10/23/03	$1,001 - $15,000
SP	Putnam Research Cl B Fund	S	10/23/03	$1,001 - $15,000
SP	Putnam Small Cap Val Fund	S	10/23/03	$1,001 - $15,000
	Home Depot Stock	P	12/2/03	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Martin Frost

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Magnolia Federal Bank for Savings	Mortgage on rental property in TX	$15,001 - $50,000

SCHEDULE VI - GIFTS

Name Martin Frost

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Bank of America Colonial Charity Golf Outing benefiting Cook Children's Medical Center	Golf and carts for four donated by Shady Oaks Country Club	$499

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Martin Frost

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
University of Miami, Miami, FL	Mar. 24 - 25, 03	DFW to Miami, Fl., Miami, FL to DCA	Y	N	Y	2 Days
The Connell Company	Feb. 7, 2003	DCA to New Jersey to DCA	N	N	N	I day

SCHEDULE VIII - POSITIONS

Name Martin Frost

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	National Jewish Democratic Council
Board Member	World Craniofacial Foundation
Board Member	Texas Weslyan University

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

MAY 04 2004

2004 MAY 14 PM 3:14

(Office Use Only)

MC

Elton Gallegly
(Full Name)

P. O. Box 940001
(Mailing Address)

Simi Valley, CA 93094-0001

Daytime Telephone: 805-522-4487

Filer Status	[XX] Member of the U.S. House of Representatives	State: CA District: 24	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [XX]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [XX]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-3-04

Name	Elton Gallegly	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Dynamic Realty	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Elton Gallegly

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster			Indefinite																Royalties								X				
	JT 1st Bank of Paducah, KY accounts						X									X										X						
JT	1791 Erringer Road Simi Valley, CA 93065								X						XX												X					
JT	1772 Sinaloa Rd., #189 Simi Valley, CA 93065	XX													XX									X								S
SP	Dynamic Realty			XX																	N/A											
JT	Union Bank				X																											
JT	Washington Mutual					X																										
SP	IRA-PershingLLC-Amgen					XX															X											P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name Elton Gallegly

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	IRA-PershingLLC-CocaCola		X					XX										
	Keough-Wells Fargo		X						X				XX					
	IRA-MERRILL LYNCH																	
	Alliance Growth							XX					XX					
	Calamos Growth Fund											N/A						
	ML Fundamental Growth			X								N/A						
	ML Small Cap Value											N/A						
	John Hancock US Global											N/A						
	Coca Cola		X															
	Ventura Pacific		X									N/A						
JT	Midland Property Ltd.											X						
	PtrXXIII who owns affordable housing at [illegible] Century Ct., [illegible], Colorado and who owns senior housing at 1[illegible]5 [illegible]" Street, Sacramento, CA 95814																	

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name: Elton Gallegly

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B [illegible]	C $15,001–$50,000	D [illegible]	E $100,001–$250,000	F [illegible]	G $500,001–$1,000,000	H [illegible]	I $5,000,001–$25,000,000	J [illegible]	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	1772 Sinaloa Rd., #189, Simi Valley		X		5-30-03			X							
SP	IRA-PershingLLC-Amgen	X			4-1-03	X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
JT	Caruana Family Trust 10920 Melvin Ave., Northbridge, CA	Mortgage 1791 Erringer Simi Valley		XX			
JT	Atlantic Mortgage 135 S. LaSalle, Chicago, IL	Mortgage 1772 Sinaloa Rd Simi Valley					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

8 HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 4:42
OFFICE OF HOUSE FILING
U.S. HOUSE OF REPRESENTATIVES

MC

E. SCOTT GARRETT
(Full Name)

100 POND SCHOOL ROAD
SUSSEX N.J 07461
(Mailing Address)

202-225-4465
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: N.J District: 05	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [✓]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [✓]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [✓]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [✓]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [✓]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [✓]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [✓]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [✓]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [✓]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	E. Scott Garrett	May 1, 04

Name E. SCOTT GARRETT	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
None			

For payments to charity in lieu of honoraria, use Schedule II.

Name E. Scott Garrett	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

Name E. Scott Garrett | Page 1 of 1

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: None	$1 - $1,000	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	$1,000,001 - $5,000,000	$5,000,001 - $25,000,000	$25,000,001 - $50,000,000	Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: None	$1 - $200	$201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	$1,000,001 - $5,000,000	Over $5,000,000	Block E: P, S, E
SP		SP					X								X																		P
DC	Examples:			Indefinite																	Royalties									X			
JT								X									X									X							
	Mey-fund family of funds (MUTUAL FUNDS)						X								X									X									

For additional assets and unearned income, use next page.

Name E. Scott Garrett | Page 1 of 1

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	None														

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Name E Scott Garrett | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	None						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Federation of Chambers of Commerce & Industry in Sri Lanka	6-27-03 7-3-03	Wash DC - London - Sri-Lanka	Y	Y	Y	N
American Israel Educ. Foundation	8-23-03 8-31-03	Newark NJ - Israel - Newark NJ	Y	Y	Y	N
Korea-US. Exchange Council	11-23-03 12-03-03	NY, NY - Seoul Korea - NY, NY	Y	Y	Y	N

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Name	Page 1 of 1
Sean Gannon	

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

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LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 12: 28

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Richard A. Gephardt
(Full Name)

1236 Longworth House Office Building Washington, DC 20515
(Mailing Address)

(202) 225-2671
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representative	State: MO District 03	☐ Officer Or Employee — Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☑	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Richard A. Gephardt	5-14-04

1546

SCHEDULE I - EARNED INCOME

Name Richard A. Gephardt

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
None		

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name Richard A. Gephardt

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
None			

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Richard A. Gephardt

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Advantage Primary Liq. Fund (formerly CIBC World Markets Primary Reserve Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P, S
JT	Alliance Growth & Income Fund	None	DIVIDENDS/CAPITAL GAINS	$1 - $200	S
JT	Columbia MO Water & Electric Bond	$15,001 - $50,000	INTEREST	$201 - $1,000	
JT	Davis NY Venture Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Harbor Capital Appreciation	None	DIVIDENDS	$1 - $200	S
JT	Investment Co. of Amer. CIC	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$201 - $1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Richard A. Gephardt

JT	Janus Growth & Income Fund	None	DIVIDENDS/CAPITAL GAINS	$1 - $200	S
JT	Mehlville MO School District Bond	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
JT	MI St. Brd. Pub. Bldgs.	$15,001 - $50,000	INTEREST	$201 - $1,000	P
JT	Missouri St. Envir. Impt. & Res. Au	$15,001 - $50,000			P
JT	Nations Int'l Value Fund	$50,001 - $100,000	DIVIDENDS	$1 - $200	
JT	Pimco Renaissance Fund	$15,001 - $50,000			S
JT	Pimco Total Return Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1,001 - $2,500	P
JT	Univ. of MO Health Facilities Bond	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Vanguard Growth & Income Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
JT	Vanguard Health Care Fund	$15,001 - $50,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	
JT	Washburn Univ. Topeka KS	$1,001 - $15,000	INTEREST	$201 - $1,000	P

SCHEDULE IV - TRANSACTIONS

Name Richard A. Gephardt

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Washburn Univ. Topeka KS	P	06/05/03	$1,001 - $15,000
JT	MI St. Brd. Pub. Bldgs.	P	04/22/03	$15,001 - $50,000
JT	Janus Growth & Income Fund	S	04/23/03	$15,001 - $50,000
JT	Harbor Capital Appreciation	S	04/25/03	$1,001 - $15,000
JT	Pimco Renaissance Fund	S	04/24/03	$15,001 - $50,000
JT	Pimco Total Return Fund	P	13 purchases/reinvestments over course of year	$1,001 - $15,000
JT	Investment Co. of Amer. CIC	P	11/14/03, 12/18/03	$15,001 - $50,000
JT	Advantage Primary Liq. Fund	P	24 purchases/reinvestments over course of year	$1,001 - $15,000
JT	Advantage Primary Liq. Fund	P	04/29/03	$1,001 - $15,000
JT	Advantage Primary Liq. Fund	S	03/24/03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name Richard A. Gephardt

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	Advantage Primary Liq. Fund	S	04/25/03	$1,001 - $15,000
JT	Advantage Primary Liq. Fund	S	06/10/03, 11/29/03	$1,001 - $15,000
JT	MI St. Env. Impt. & Res. Au	P	04/22/03	$15,001 - $50,000
JT	Alliance Growth & Income Fund	S	11/14/03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Richard A. Gephardt

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	First Tennessee Bank	Student Loan	$15,001 - $50,000
JT	General American Life Insurance Company	Loan on Life Insurance Policy	$15,001 - $50,000

SCHEDULE VI - GIFTS

Name Richard A Gephardt

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
None		

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Richard A. Gephardt

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
None			N	N	N	

SCHEDULE VIII - POSITIONS

Name Richard A. Gephardt

Raport all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	None

SCHEDULE IX - AGREEMENTS

Name Richard A. Gephardt

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

James William Gerlach
(Full Name)

649 Deep Hollow Road Chester Springs, PA 19426
(Mailing Address)

610-458-8010
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: PA District: 06	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/13/04

1558

SCHEDULE I - EARNED INCOME

Name James William Gerlach

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Pennsylvania State Employees Retirement System	Legislative Pension	$57,000

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name James William Gerlach

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Philadelphia Inquirer	Article	October 21,2003	$50
Diageo North American	Event Participation	March 24, 2003	$500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James William Gerlach

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Vanguard Group - Balanced Index Fund, Life Strategy Mod. Growth, & 500 Index Fund	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	
	State Deferred Compensation Program - State Index Fund, Extended Market Fund, Enhanced Tactical Fund	$1,001 - $15,000	DIVIDENDS	$1,001 - $2,500	
	Congressional Federal Credit Union Accounts	$15,001 - $50,000	INTEREST	$1 - $200	

SCHEDULE VIII - POSITIONS

Name James William Gerlach

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Mission for Education of Children with Autism
Director	Brandywine Health and Wellness Foundation
Director	Brandywine Transitional Corporation
President	Gerlach Corporation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
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HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only)

James Arthur Gibbons
(Full Name)

2535 Kinney Lane, Reno, Nevada 89511 775-851-4266
(Mailing Address) Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: NY District: 07	☐ Officer or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James A. Gibbons	May 15, 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Nevada State Legislature	Spouse Salary	N/A
	Politek, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name James Arthur Gibbons | Page 3 of 6

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	*Examples:*	A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
SP	Mega Corp Stock		X																								
	Simon & Schuster	Indefinite																									P
	1st Bank of Paducah, KY accounts					X																					
															Royalties												
JT	US Bancorp			X										X										X			
	Dean Witter IRA variable annuity				X																		X				
SP	Dean Witter IRA variable annuity			X																			X				
	Delta Family Care Savings				X									X										X			
JT	Dean Witter variable annuity			X									X		X								X				
	US Bank of Nevada			X										X										X			

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James Arthur Gibbons

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
DC	US Bank of NV		X						X									
DC	Dean Witter: Coca-Cola Stock							X										
DC	Dean Witter: Intel Corp. Stock			X				X										
DC	Dean Witter: US Treas/Coupon Bond				X				X					X				
DC	Dean Witter: Euro Growth Fund		X					X		X								
DC	Dean Witter: Global Dividend Growth Fund		X					X					X					
DC	Dean Witter: American Value Fund		X					X					X					
DC	Dean Witter: Dividend Growth Fund							X		X				X				
DC	State Farm: Life Policy, Universal											X						
	Delta Pension			X								X						
	Dean Witter Money Market		X							X			X					
	US Airforce Asst.		X									X						
JT	Deming Syndicate Inc. Corp Stock							X		X		X						
	2 vacant lots in Nevada*				X							X						
	1. No. Washoe Co. 520 Acre																	
	2. No. Washoe Co. 40 Acre																	
	1 vacant lot in Nevada*	X								X						X		S
	1. Nederland Rd. 47 Acre																	
	* all unimproved and vacant																	

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name James Arthur Gibbons

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	Vacant Lot In Nevada Nedekind Road 1.17 Acre		X		08-14-2003				X						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
01/01/01	Delta Pension Benefits	Monthly Withdrawal of $504.00
01/01/01	Delta Traveler's Pension	Monthly Withdrawal of $161.95

GPO: 2004 91-810 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 12 PM 12:42
MC
(Office Use Only) LRC
U.S. HOUSE OF REPRESENTATIVES

Wayne T. Gilchrest
(Full Name)

13501 Turners Creek Road, Kennedyville, Md., 21645 — 410-348-2018
(Mailing Address) — Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Maryland District: First	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wayne T. Gilchrest	May 12, 2004

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		None; A $1 – $1,000; B $1,001 – $15,000; C $15,001 – $50,000; D $50,001 – $100,000; E $100,001 – $250,000; F $250,001 – $500,000; G $500,001 – $1,000,000; H $1,000,001 – $5,000,000; I $5,000,001 – $25,000,000; J $25,000,001 – $50,000,000; K Over $50,000,000; L Other (Specify)	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; VALUE OF FUND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None; I $1 – $200; II $201 – $1,000; III $1,001 – $2,500; IV $2,501 – $5,000; V $5,001 – $15,000; VI $15,001 – $50,000; VII $50,001 – $100,000; VIII $100,001 – $1,000,000; IX $1,000,001 – $5,000,000; X $5,000,001 – Over $5,000,000; XI	P, S, E
SP, DC, JT *Examples:* SP Mega Corp. Stock			X								P
DC Simon & Schuster		Indefinite							Royalties		X	
JT 1st Bank of Paducah, KY accounts			X					X				
JT Comcast Corp- Class A			X					X				
JT Delphi Corp			X					X				
JT Dominion Resources			X					X				
JT General Motors			X					X		II		
JT Intel Corp			X					X				
JT Nuveen Mun Value Fund			X					X		I		

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Wayne T. Gilchrest

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	X Over $5,000,000	BLOCK E Transaction P, S, E
JT	Pepco Holdings Inc.		X					X										
JT	SBC Communications		X					X										
JT	Verizon Communications							X										
JT	Viacom, Inc.		X					X					X					
JT	WGL Holdings, Inc.		X					X										
JT	US Gov't Money Market								X				X					
JT	Allianceber Worldwide		X					X										
JT	American Gr Fd of Am		X					X										
JT	American Inc Fd of Am		X					X										
JT	American WA Mutual B		X					X										
JT	Global Advantage Fd B		X					X										

All securities are held in street name with Morgan Stanley. All dividends and interest are paid directly to them. They, in turn, file annual federal forms 1099 to the Gilchrests in the $ [illegible] 500 - $ 5,000 range.

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SCHEDULE IV — TRANSACTIONS

Name Wayne T. Gilchrest

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
JT	GNMA		X		08–20–03	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug 6–11	Wash., D.C.--Los Angeles—Cleveland	Y	Y	Y	2 Days
Alaska Coalition, Alaska	June 28 -	Wash., D. C. to Fair-	Y	Y	N	N
Wilderness League, National	July 3	banks, Artic Village,	$ 411	$ 138		
Audubon Society, Natural		Artic National Wildlife				
Resources, Defense Council,		Refuge, Kaktonik, Pru-				
Sierra Club, The Wilderness		dhoe Bay, Fairbanks -				
Society.		Wash. D. C.				
		$ 2,177				

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Page No.

Paul E. Gillmor
(Full Name)

7750 North County Road 51 Old Fort, OH 44861
(Mailing Address)

202-225-6405
Daytime Telephone:

(Office Use Only)

Filer Status: [x] Member of the U.S. House of Representatives — State: OH District: 5 — [ ] Officer Or Employee — Employing Office:

Report Type: [x] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes [x] No [ ]	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes [ ] No [x]	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes [x] No [ ]	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes [x] No [ ]	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes [ ] No [x]	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes [ ] No [x]	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes [ ] No [x]	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes [x] No [ ]	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes [ ] No [x]	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C app 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	May 13, 2004

1574

SCHEDULE I - EARNED INCOME

Name Paul E. Gillmor

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Ohio	Spouse salary	N/A
Public Employees Retirement System of Ohio	Pension	$46,212

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul E. Gillmor

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
SP	AIG - stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Astro Power -stock	$1 - $1,000	DIVIDENDS	NONE	
	Bayshore leasing - note	$1,001 - $15,000	INTEREST	NONE	
	Bayshore leasing - stock	$15,001 - $50,000	DIVIDENDS	NONE	
	Berkshire Hathaway	$15,001 - $50,000	DIVIDENDS	NONE	P
	Charles Schwab & Co margin account	$1,001 - $15,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul E. Gillmor

	David Phillips note	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Dealers Alliance - stock	$250,001 - $500,000	DIVIDENDS	$1,001 - $2,500	
	DeNovo Corporation - stock	$1,001 - $15,000	DIVIDENDS	NONE	
	EZ Color - note	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	EZ Color - stock	$15,001 - $50,000	DIVIDENDS	NONE	
	Fidelity Spartan Money Market - mutual fund	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	First Federal account	$1,001 - $15,000	INTEREST	$1 - $200	
	First Service - stock	$15,001 - $50,000	DIVIDENDS	NONE	
	First Solar - stock	$1,001 - $15,000	INTEREST	$1 - $200	
SP	FirstStar Bank - savings account	$1,001 - $15,000	INTEREST	$1 - $200	
	Gillmor Family Partnership	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Gillmor Financial Services - stock	$5,000,001 - $25,000,000	DIVIDENDS	$100,001 - $1,000,000	
	Inter-Tel - stock	$15,001 -- $50,000	DIVIDENDS	NONE	
	Max & Erma's Restaurants - stock	$15,001 - $50,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul E. Gillmor

	National Research Corporation - stock	$15,001 - $50,000	DIVIDENDS	NONE	
SP	Northwest Natural Gas - stock	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Oakmark Select - mutual fund	$50,001 - $100,000	DIVIDENDS	$1 - $200	
	Ohio Legacy	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	Ohio Public Employees Comp Program	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
SP	Old Fort Bank account	$1 - $1,000	INTEREST	$1 - $200	
	Old Fort Bank account	$250,001 - $500,000	INTEREST	$201 - $1,000	
	Old Fort Bank IRA account	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
SP	Old Fort Bank IRA account	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Paul M. Gillmor Company - stock	$250,001 - $500,000	DIVIDENDS	$5,001 - $15,000	
	Popular, Inc - stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Safety Kleen - stock	$1 - $1,000	DIVIDENDS	NONE	
SP	Southwest Natural Gas - stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	T. Rowe Price funds	$15,001 - $50,000	INTEREST	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Paul E. Gillmor

	Universal Electronics - stock	$1,001 - $15,000	DIVIDENDS	NONE	
	Vanguard Total Stock Market Fund - mutual fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Wright-Patman Congressional Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE IV - TRANSACTIONS

Name Paul E. Gillmor

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Berkshire Hathaway	P	11-17-2003	$15,001 - $50,000
	Ohio Legacy	P	4-25-2003	$1,001 - $15,000
	Adtran	S	9-8-2003	$1,001 - $15,000
	Solar Cells, aka First Solar	S	7-15-2003	$1,001 - $15,000

SCHEDULE VIII - POSITIONS

Name Paul E. Gillmor

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Gillmor Financial Services
Director	Old Fort Banking Company
Director	EZ Color, Inc.
Director	Bayshore Leasing
Director	DeNovo Corporation
Director	Paul M. & Lucy J. Gillmor Foundation
Director	Paul M. Gillmor Company

FOOTNOTES

Name Paul E. Gillmor

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Stock declined in value	Astro Power - stock
2	Schedule III	Stock increased in value	Dealers Alliance - stock
3	Schedule III	Stock increased in value	Inter-Tel - stock
4	Schedule III	Stock increased in value	National Research Corporation - stock
5	Schedule III	Deposit of dividends from Gillmor Financial	Old Fort Bank Account
6	Schedule III	Fund increased in value	Vanguard Total Stock Market Fund - mutual fund

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 4:55
MC
(Office Use Only)

John Phillip Gingrey
(Full Name)

632 N. St. Mary's Lane
(Mailing Address)

(202) 225-2931
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: Georgia District: 11	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Phil Gingrey	5/17/04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name John Phillip Gingrey　　Page 2 of 9

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	III $201 – $1,000	V $2,501 - $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	P, S, E
Examples: SP	Mega Corp. Stock			X				X										P
	Simon & Schuster	Indefinite									Royalties					X		
	1st Bank of Paducah, KY accounts								X									
SP	Matria Healthcare		X					X						X				
JT	Community Bank of the South			X				X										
SP	Coca Cola Co. Stock							X										
SP	Wal Mart Stores, Inc Stock		X					X										
	Schwaab Money Market Fund		X						X				X					
	Coca Cola Enterprises Stock		X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Phillip Gingrey

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Home Depot Inc. Stock		X					X										
	Vanguard Healthcare Fund							X										
	Citigroup Inc. Stock							X										
	WTS Conseco Inc. Stock		X															
	Conseco Inc. Stock		X															
	EMC Corp. Stock		X					X										
	General Electric Co Stock		X					X						X				
	Liberty Media Corp. Stock																	
	Matria Healthcare Stock		X															
	Sprint Corp. Stock		X					X					X					
	Time Warner Inc. Stock		X															
	Travelers PRTY CAS Corp. Stock																	
	Worldcom Inc. Stock											X						
	Cadbury Schweppes Stock		X					X										
	Conseco Finance Tr. Stock																	
	Dillards Capital Trust Stock							X										
	Aim Premier Equity Mutual Fund			X														P
	American Balanced Mutual Fund			X														P
	Calamos Growth & Income Mutual Fund			X										X				P
	Calamos Growth Mutual Fund			X														P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Phillip Gingrey

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Columbia Strategic Value Fund			X				X							X			
	Davis NY Venture Fund			X											X			P
	Delaware Trend Mutual Fund																	
	Eaton Vance Worldwide Health													X				P
	Idex Great Companies America													X				
	Invesco Equity Income Fund			X														
	PIMCO Renaissance Fund			X											X			
	Scudder Flag Investors Fund													X				
	Scudder Global Fund			X											X			
	AT&T Capital Corp. Stock	X						X	X					X				S
	Highwoods Property Stock							X						X				
	MEPC Int'l Stock							X										
	News Corp. Overseas Stock			X				X										
	Imprimis / Ener 1 Stock		X															
	Home Holdings Corp. Stock		X															
	Boeing Stock							X										
	Coca Cola Stock			X				X										
	Janus Fund	X																S
	Putnam Europe Fund	X																S
	Alabama Power Stock	X						X					X					S
	Media One Finance Stock	X						X						X				S
	Seagram, Joseph E & Sons Stock	X										X						S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Phillip Gingrey

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	BG Properties Adrian Place; Atlanta, GA Old Hwy 5; Canton, GA																	
	Church Street Properties Church St., Marietta, GA					X									X			
	Courtyard Properties Courtyard St., Auburn, AL																	
	West Cobb Properties Dallas Hwy, Marietta, GA																	
	Marietta Outpatient Surgery, LTD Marietta, GA 30064 Stock							X							X			
	GMB Properties Alexander St. Marietta				X										X			

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SCHEDULE IV — TRANSACTIONS

Name John Phillip Gingrey | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: SALE	Date (MO/DAY/YR)	Amount of Transaction: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock		10–12–03	X				
	Aim Premier Equity Mutual Fund		5/2/03					
	American Balanced Mutual Fund		12/5/03	X				
	Calamos Growth & Income Mutual Fund		4/19/03	X				
	Calamos Growth & Income Mutual Fund		12/5/03	X				
	Calamos Growth Mutual Fund		7/1/03	X				
	Calamos Growth Mutual Fund		12/5/03	X				
	Davis New York Venture Mutual Fund		5/2/03	X				
	Eaton Vance Worldwide Health Mutual Fund		6/24/03	X				
	Eaton Vance Worldwide Health Mutual Fund		7/1/03	X				
	Janus Mutual Fund	X	11/19/03	X				
	Putnam Europe Equity Fund	X	11/18/03	X				
	Alabama Power Company Stock	X	4/28/03	X				
	AT & T Capital Corp. Stock	X	12/15/03	X				
	Media One Finance Stock	X	10/28/03	X				
	Seagram, Joseph & Sons Stock	X	11/20/03	X				

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Name Phil Gingrey | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	Southern National Bank Marietta, GA	Home Equity Loan 432 N. St. Mary's Ln., Marietta		X			
	Charter Bank Marietta, GA	Mortgage on Office Building Church St.; Marietta, GA		X			
	Community Bank of the South Smyrna, GA	Mortgage on office Building Dennis Hwy; Marietta, GA					
	California Federal California	Mortgage on rental apts. Alexander St., Marietta, GA					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Public Governance Institute	Feb 28 - Mar 2	Wash. DC - Greenbrier - Wash D.C.	Y	Y	Y	N
	American Israel Education Foundation	Aug 23 - Aug 31	Atlanta - Israel - Atlanta	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	GMB Properties
Partner	Church St. Properties
Partner	Courtyard Properties
Partner	West Cobb Properties

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY -6 AM 11:31
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

CHARLES A. GONZALEZ
(Full Name)

206 EAST LOCUST ST.
(Mailing Address)

SAN ANTONIO, TX 78212

Daytime Telephone
210-472-6195

Filer Status	[X] Member of the U.S. House of Representatives	State: District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles A. Gonzalez	May 6, 2004

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

Name CHARLES A. GONZALEZ

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X																			P
	Simon & Schuster			Indefinite																Royalties													
	1st Bank of Paducah, KY accounts						X									X									X								
	CONGRESSIONAL FEDERAL CREDIT UNION			X												X						X											

For additional assets and unearned income, use next page.

Name	CHARLES A. GONZALEZ	Page 4 of 4

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	BANK OF AMERICA VISA	CREDIT CARD	X									
	CHASE MASTERCARD	CREDIT CARD	X									
	CONGRESSIONAL FEDERAL CREDIT UNION	UNSECURED LOAN		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003 | For use by Members, officers, and employees

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2004 JUN -3 AM 11:44

(Office Use Only)

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

CHARLES A. GONZALEZ
(Full Name)

206 EAST LOCUST ST.
(Mailing Address)

SAN ANTONIO, TX 78212

Daytime Telephone 210-472-6195

Filer Status	[X] Member of the U.S. House of Representatives — State: District:	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles A. Gonzalez	June 3, 2004

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

7
LEGISLATIVE [illegible] CENTER
2004 MAY 17 PM 4:45
[illegible] CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Virgil H. Goode, Jr.
(Full Name)

90 East Church Street
(Mailing Address)

Rocky Mount, VA 24151

Daytime Telephone: 202-225-4711

Filer Status	[X] Member of the U.S. House of Representatives — State: VA District: 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [XX]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [XX]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [XX]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [XX]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

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TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Virgil H. Goode, Jr.	May 17, 2004

1597

Name Virgil H. Goode, JR.	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Executor Fee on Aunt's Estate - Approved by Ethics Committee		$ 92,750.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Virgil H. Goode, Jr.

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT *Examples:*	SP Mega Corp. Stock	E	DIVIDENDS	IV	P
	Simon & Schuster	Indefinite	Royalties		
	1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	2acres with old office Rt 2, Rocky Mount, VA	E	None		
	1/2 interest in 50 acres Rt. 3, Ferrum, VA 24088	D	None		
	lot and office - 235 S. Main St. Rocky Mount, VA	E	None		
	1/2 interest - 3 lots Kohler Rt. 1, Fieldale, VA 24089	C	None		
	1/2 interest in 200 acres in house and land Rt 2, Rocky Mount, VA with sister	F	None		
	1/2 interest with sister 28 acres, Rt 1, Henry, VA	C	None		

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H. Goode, Jr.

Page 2 of 4

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 - $15,000	E $50,001 - $100,000	G $250,001 - $500,000	I $1,000,001 - $5,000,000	K $25,000,001 - $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 - $1,000	V $2,501 - $5,000	VII $15,001 - $50,000	IX $100,001 - $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	1/2 interest with sister in 2 acres at Henry		X										X					
	1/2 interest with sister in 7.78 acres in BRD in Franklin County, VA		X								None	X						
	combined checking/saving suntrust Bank			X					X				X					
SP	Altria Stock		X					X					X					
JT	Loudoun Co. Mun. Bond		X						X				X					called
	Suntrust Stock				X			X										
	Cardinal Stock							X					X					
	Capital One Stock			X				X					X					
	Peoples Bank Stock		X					X					X					
	Central Natl. Bank Stock										None	X						
	Shenandoah Natl. Bank Stock		X					X										
	Patriot Bank Stock		X					X										
	Vanguard Municipal Bond Fund			X					X									
SP	Suntrust combined checking saving		X						X									
	Wachovia							X										
SP	Vanguard Municipal Bond Fund								X				X					
	J.P. Morgan-Chase Common Stock							X					X					
	Household Preferred		X					X					X					called
	Henry County Plywood Stock		X					X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H. Goode, Jr.

Page 3 of 4

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B [illegible]	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L [illegible]	BLOCK C Type of Income: DIVIDENDS	[illegible]	INTEREST	[illegible]	EXCEPTED TRUST	[illegible]	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II [illegible]	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VI [illegible]	VII $15,001 – $50,000	VIII [illegible]	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	BLOCK E Transaction P, S, E
	ATT Stock			X										X								X										
	Lucent Technologies Stock			X										X						None	X											
	Barrick			X										X								X										
SP	Newport News Mun. Bond			X												X							X									called
	BB and T													X									X									
	Wheat First(IRA)			X												X							X									
	Suntrust (IRA)			X												X							X									
	Congressional Fed. Credit			X												X																
	Union																															
	Chesapeake Bay Bond			X												X							X									
	First VA Bank Stock			X										X									X									owned 1/1/87
	Federal Thrift Savings Plan					X								X											X							
	American Electric Power					X								X																		
	Occidental Petroleum													X									X									
	DCH Technology																			None	X											
	Dimon			X										X																		
	Exxon													X									X									
	Ballard Power			X																None	X											
	Coca-Cola Stock													X											X							
JT	Main Street Bank			X																None	X											
	Aunt's Estate															X									X							inherit
	Allegheny Energy													X						NONE	X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H. Goode, Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B [redacted]	C $1,001 – $15,000	D [redacted]	E $50,001 – $100,000	F [redacted]	G $250,001 – $500,000	H [redacted]	I $1,000,001 – $5,000,000	J [redacted]	K $25,000,001 – $50,000,000	L [redacted]	BLOCK C Type of Income: DIVIDENDS	[redacted]	INTEREST	[redacted]	EXCEPTED TRUST	[redacted]	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II [redacted]	III $201 – $1,000	IV [redacted]	V $2,501 – $5,000	VI [redacted]	VII $15,001 – $50,000	VIII [redacted]	IX $100,001 – $1,000,000	X [redacted]	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Capital One Pfd			X										X									X									sold
	Agere Sys			X										X						None	X											
	AVT Wireless			X										X						None	X											
	Charter Communications			X										X						None	X											
	Corning			X										X						None	X											
	R.J. Reynolds					X								X						[redacted]	[redacted]				X							
	Va Public School Authority			X												X							X									
	Comcast			X																None	X											
	Powhatan Co. Bond															X																
	Ford Motor			X										X									X									purchase
	Eagle Broadband			X																NONE												purchase
	Franklin Com Bank															X																deposit
	El Paso													X										X								purchase
	Altria					X								X										X								purchase

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SCHEDULE IV — TRANSACTIONS

Name Virgil H. Goode, Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
JT	Loudoun County Bond	called			10/1/03	X									
	Household Financial	called			5/15/03	X									
SP	Newport News	called			11/3/03	X									
JT	Ford Motor	X			3/27/03	X									
	Cap One Pfd		X		3/19/03	X									
	Eagle Broad Band	X	X		10/29/03 11/28/03	X X									
	El Paso	X			2/13/03	X									
	Altria	X			2/6/03		X								

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

Robert W. Goodlatte
(Full Name)

3725 Dogwood Lane SW Roanoke, VA 24015
(Mailing Address)

202.225.5431
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives State: VA District: 06 ☐ Officer Or Employee Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rob Goodlatte	5-19-04

SCHEDULE I - EARNED INCOME

Name Robert W. Goodlatte

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Glenn, Feldman, Darby and Goodlatte, P.C., Roanoke, VA	Spouse Salary	N/A
RGC Resources, Inc	Spouse Directors Compensation	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert W. Goodlatte

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	American Fund Tax Exempt Bonds	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Glenn Feldman Darby and Goodlatte	$15,001 - $50,000	DIVIDENDS	NONE	
JT	Independent Natl Mortgage Corp CT	$1,001 - $15,000	INTEREST	$1,001 - $2,500	
JT	State St Res Equity TR	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Centnl MM TR AG Edwards	$15,001 - $50,000	INTEREST	$201 - $1,000	
	Centnl MM TR AG Edwards IRA	$1,001 - $15,000	INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert W. Goodlatte

	Templeton Foreign Fund IRA	$1,001 - $15,000	DIVIDENDS	$201 - $1,000
	Investment Co of America IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
	UTS Government Secs Inc IRA	$15,001 - $50,000	INTEREST	$1 - $200
SP	Legg Mason Cash Account 401K	$50,001 - $100,000	INTEREST	$201 - $1,000
JT	MFS Virginia Muni Bond Fund	$15,001 - $50,000	INTEREST	$1,001 - $2,500
JT	T Rowe Price Int Stock Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
DC	Wachovia Bank	$1,001 - $15,000	INTEREST	$201 - $1,000
	Valley Bank Roanoke CD	$15,001 - $50,000	INTEREST	$1,001 - $2,500
DC	NBC Bank Savings & Checking	$15,001 - $50,000	INTEREST	$201 - $1,000
JT	NBC Bank Savings	$50,001 - $100,000	INTEREST	$201 - $1,000
JT	T Rowe Price S&P Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
SP	RGC Resources	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
SP	Eaton Vance Ltd Duration 401K	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
SP	First Eagle Global Fund 401K (name change from SoGen Interntl Fund 401K)	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert W. Goodlatte

JT	Wachovia Bank, Roanoke, VA - Savings	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Bank of America, Roanoke, VA - Savings	$1,001 - $15,000	INTEREST	$1 - $200	
JT	First Citizens Bank, Roanoke, VA - Savings/Checking	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
	First Citizens Bank, Roanoke, VA - Savings	$15,001 - $50,000	INTEREST	$1,001 - $2,500	
	Suntrust Bank, Roanoke, VA IRA	$1,001 - $15,000	INTEREST	$201 - $1,000	
SP	Suntrust Bank, Roanoke, VA	$1,001 - $15,000	INTEREST	$201 - $1,000	
JT	Greenwood Trust Co., DE	$1,001 - $15,000	INTEREST	$1 - $200	
	Mass Mutual Life - Life Insurance	$1,001 - $15,000	DIVIDENDS	$1 - $200	
SP	Duff-Phelps Utilities 401K	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
SP	Guardian Park Ave 401K	$15,001 - $50,000	DIVIDENDS	$1 - $200	
JT	Valley Bank Roanoke, VA - checking	$1 - $1,000	INTEREST	NONE	
SP	Bond Fund of America 401K	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
SP	New Persp Fund 401K	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
SP	New York Venture Fund 401K	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Robert W. Goodlatte

SP	Bankers Trust Market Lnk 401K	$15,001 - $50,000	INTEREST	NONE
SP	Seligman Communications 401k	$15,001 - $50,000	DIVIDENDS	NONE
SP	GAM Internationl Funds 401K	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500
DC	Valley Bank, Roanoke, VA CD	$15,001 - $50,000	INTEREST	$1 - $200
	Janus Fund IRA	$15,001 - $50,000	DIVIDENDS	NONE
SP	Fifth Third Bancorp IRA	$1,001 - $15,000	DIVIDENDS	$201 - $1,000
SP	GNMA Government Security IRA	$1 - $1,000	DIVIDENDS	$1 - $200
SP	Merrill Lynch Fund Growth - IRA	$15,001 - $50,000	DIVIDENDS	NONE
SP	Wash. Mutual Investment Fund - IRA	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
SP	Merrill Lynch Retr Res IRA	$1 - $1,000	INTEREST	$1 - $200
SP	Nicholas Fund IRA	$1,001 - $15,000	DIVIDENDS	NONE

SCHEDULE IV - TRANSACTIONS

Name Robert W. Goodlatte

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Bankers Trust EUFE Linked CD - 401K	S	3-24-03	$15,001 - $50,000
SP	RGC Resources	P	5-1-03	$15,001 - $50,000
JT	T Rowe Price S&P 500 Fund	P	11-28-03	$15,001 - $50,000
SP	Eaton Vance LTD Duration 401K	P	5-27-03	$15,001 - $50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Robert W. Goodlatte

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Public Governance	Feb 28-March 2	White Sulper Spring, WVA	Y	Y	Y	None
Dairy Farmers of America	March 24	DC-Kansas City-DC	N	Y	N	None
Federal Communication Bar Assoc	May 2-3	Hot Springs, VA	Y	Y	N	None
Cellular Telephone Industry Assoc	May 16-18	Hot Springs, VA	Y	Y	Y	None
Restoration Weekend	November 13-16	Roanoke, VA-Palm Beach, FL-Wash, DC	Y	Y	Y	None

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(26)

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(Office Use Only)

Barton Jennings Gordon
(Full Name)

940 E. Northfield Blvd
(Mailing Address)

Murfreesboro, Tennessee 37130

202-225-4231
Daytime Telephone

Filer Status	[✓] Member of the U.S. House of Representatives	State: Tennessee District: 6th	[ ] Officer or Employee — Employing Office:
Report Type	[✓] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [✓]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [✓]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [✓]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [✓]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [✓]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [✓]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [✓]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [✓]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [✓]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [✓]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Barton J Gordon	6/14/04

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Name	Page
Barton J. Gordon	2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Korn/Ferry International	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Barton J. Gordon | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Mega Corp Stock					X								X																			P
DC	Examples: Simon & Schuster			Indefinite																Royalties										X			
JT	1st Bank of Paducah, KY accounts						X									X																	
	Wright Patman Credit Union				X											X																	
	Smith Barney IRA (A)				X											X																	
SP	Fidelity 401(k) S&P 500 Index Fund						X														X												
SP	Korn/Ferry Stock + Options									X											X												

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Barton J. Gordon

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
SP	Korn/Ferry Wealth Acc Plan			X	
SP	Northwest Mutual Life Ins.			X	
SP	Smith Barney FMA (B)		X X	X	
DC	" Ed. Savings (C)	X		X	
DC	Smith Barney w/ DC/UTMA (D)		X X	X	
SP	Smith Barney Asset Mgmt		X X	X	
	Large Cap Growth				
JT	Smith Barney FMA (E)		X	X	
SP	Smith Barney Asset Mgmt.	X	X X	X	
	Mult-cap Growth				
SP	Smith Barney Asset Mgmt		X	X	
	All Cap Value Balanced				
DC	Smith Barney Irrev. Trust (F)		X	X	
	Feingold O'Keefe Bond Fund	X	X X	X	
	Hedge Fund, Boston, MA				
JT	Park Center Partnership		X X	X	
	Maryland Farms Office				
	Park, Brentwood, TN				

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SCHEDULE IV — TRANSACTIONS

Name Barton J. Gordon | Page 5 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
DC	Smith Barney Irrevocable Trust (F)	X			12/31/03		X								
[redacted]	Feingold, O'Keefe Bond Fund	X			[redacted]			X							
SP	(See attached transaction detail for Smith Barney FMA (B))														

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Name Barton J. Gordon | Page 6 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Ripon Educational Fund	Aug 10–15.	Wash. D.C. – London – Wash.	Y	Y	Y	1 Day

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SMITH BARNEY citigroup

Ref. 00014317 00075211

Select Client
Individual Retirement Account

December 1 - December 31, 2003

(A) SMITH BARNEY IRA

BARTON JENNINGS GORDON

Account number [redacted]

Mutual funds

Yield is the current distribution annualized, divided by the fund's net asset value at the end of the statement period. Distributions may consist of income, capital gains or the return of capital. Distributions and current dividend for funds not sponsored by us are based upon information provided by an outside vendor and are not verified by us. **"Tax-Based Cost vs. Current Value"** *is being provided for information purposes only.* **"Cash Distributions (since inception)"** *when shown may not reflect all distributions received in cash due to but not limited to the following: investments made prior to 1/1/89, asset transfers, recent activity and certain adjustments made in your account.* **"Total Purchases vs. Current Value"** *is provided to assist you in comparing your* **"Total purchases"**, *excluding reinvested distributions, with the current value of the fund's shares in your account.* **"Fund Value Increase/Decrease"** *reflects the difference between your total purchases and the current value of the fund's shares, plus cash distributions since inception.*

Number of shares	Description	Date acquired	Cost	Share cost	Current price	Current value	Unrealized gain/(loss)	Net Value Increase/ Decrease	Yield	Anticipated income (annualized)
1,340.483	ALLIANCEBERNSTEIN GROWTH AND INCOME FUND CLASS B	03/13/01	$ 5,000.00	$ 3.73	$ 3.33	$ 4,463.81	($ 536.19) LT			
1,340.483	**Total Purchases**		5,000.00	3.73	3.33	4,463.81	(536.19)			
51.37	Reinvestments to date		171.41	3.336	3.33	171.06	(.35) LT			
7.631	Reinvestments to date		22.30	2.922	3.33	25.41	3.11 ST			
1,399.484	**Tax-based Cost vs. Current Value**		5,193.71	3.711		4,660.28	(533.43)		.48	22.39
	Total Purchases vs. Current Value		5,000.00			4,660.28		(339.72)		
	Fund Value Increase/Decrease							(339.72)		
70.136	ALLIANCEBERNSTEIN TECHNOLOGY FUND CLASS B	03/13/01	5,000.00	71.29	49.65	3,482.25	(1,517.75) LT			
70.136	**Total Purchases**		5,000.00	71.29	49.65	3,482.25	(1,517.75)			
103	Reinvestments to date		7.01	68.058	49.65	5.11	(1.90) LT			
70.239	**Tax-based Cost vs. Current Value**		5,007.01	71.285		3,487.36	(1,519.65)			
	Total Purchases vs. Current Value		5,000.00			3,487.36		(1,512.64)		
	Fund Value Increase/Decrease							(1,512.64)		
87.219	SMITH BARNEY AGGRESSIVE GROWTH FUND CL B	03/13/01	7,500.00	85.99	78.21	6,821.40	(678.60) LT			
	Total Purchases vs. Current Value		7,500.00			6,821.40		(678.60)		
	Fund Value Increase/Decrease							(678.60)		
167.56	SMITH BARNEY SMALL CAP VALUE FUND CLASS B	03/13/01	2,500.00	14.92	19.35	3,242.29	742.29 LT			
167.56	**Total Purchases**		2,500.00	14.92	19.35	3,242.29	742.29			
6.111	Reinvestments to date		94.26	15.424	19.35	118.25	23.99 LT			
9.392	Reinvestments to date		183.62	19.55	19.35	181.74	(1.88) ST			
183.063	**Tax-based Cost vs. Current Value**		2,777.88	15.174		3,542.28	764.40			
	Total Purchases vs. Current Value		2,500.00			3,542.28		1,042.28		
	Fund Value Increase/Decrease							1,042.28		
184.502	SMITH BARNEY FUNDAMENTAL VALUE FUND CL B	03/13/01	2,500.00	13.55	13.34	2,461.26	(38.74) LT			
184.502	**Total Purchases**		2,500.00	13.55	13.34	2,461.26	(38.74)			

SMITH BARNEY citigroup

Select Client
Individual Retirement Account
December 1 - December 31, 2003

Ref 00014317 00075212

BARTON JENNINGS GORDON

Account number [redacted]

Mutual funds *continued*

Number of shares	Description	Date acquired	Cost	Share cost	Current price	Current value	Unrealized gain/(loss)	Net Value Increase/ Decrease	Yield	Anticipated Income (annualized)
	SMITH BARNEY FUNDAMENTAL VALUE FUND CL B									
695	Reinvestments to date		$ 9.08	$ 13.064	$ 13.34	$ 9.27	$ .19 LT			
185.197	Tax-based Cost vs. Current Value		2,509.08	13.548		2,470.53	(38.55)			
	Total Purchases vs. Current Value		2,500.00			2,470.53		(29.47)		
	Fund Value Increase/Decrease							(29.47)		
130.206	SMITH BARNEY MID CAP CORE FUND CLASS B	03/13/01	2,500.00	19.20	19.56	2,546.87	46.87 LT			
	Total Purchases vs. Current Value		2,500.00			2,546.87		46.87		
	Fund Value Increase/Decrease							46.87		
500	SMITH BARNEY LARGE CAPITALIZATION GROWTH FD CL B	03/13/01	10,000.00	20.00	20.81	10,405.00	405.00 LT			
	Total Purchases vs. Current Value		10,000.00			10,405.00		405.00		
	Fund Value Increase/Decrease							405.00		
Total mutual funds (Tax based)			$ 35,487.68			$ 33,933.72	$ 1.23 ST ($ 1,555.19) LT	(1,066.28)	.06	$ 22.39
Total Fund Value Increase/Decrease									.20	$ 97.20
Total portfolio value			$ 47,956.07			$ 46,402.11	$ 1.23 ST ($ 1,555.19) LT			

TRANSACTION DETAILS *All dates of transactions appearing on this statement are settlement dates.*

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/26/03	Reinvest	ALLIANCEBERNSTEIN GROWTH AND INCOME FUND CLASS B WITHDRAWAL, PENDING REINVEST			$ -5.59
12/26/03	Reinvest	ALLIANCEBERNSTEIN GROWTH AND INCOME FUND CLASS B REINVESTMENT SHS FOR 12/26/03 REINVESTED AMOUNT $5.59	1.704	3.28	0.00
12/30/03	Reinvest	SMITH BARNEY SMALL CAP VALUE FUND CLASS B	9.392	19.55	-183.62
Total securities bought and other subtractions					$ -189.21
Total securities sold and other additions					$ 0.00

SMITH BARNEY citigroup

Ref 00014317 00075213

A

Select Client
Individual Retirement Account
December 1 - December 31, 2003

BARTON JENNINGS GORDON

Account number [redacted]

Withdrawals

Date	Description	Reference no	Amount
12/19/03	$40 2003 RETIREMENT PLAN FEE WAIVED FOR SELECT CLIENT		0.00

Date	Description	Reference no.	Amount

EARNINGS DETAILS

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/26/03	ALLIANCEBERNSTEIN GROWTH AND INCOME FUND CLASS B	CASH DIV ON 1397.7800 SHS	$ 5.59		$ 5.59
Total dividends earned			$ 5.59	$ 0.00	$ 5.59

Bank Deposit Program Interest℠

This section contains interest credited to your account. Accrued interest is not included. See Portfolio details section for accrued interest information.

Date	Description	Comment	Taxable	Non-taxable	Amount
12/12/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 11/17/03-12/14/03 28 DAYS AVERAGE YIELD .62 %.	$ 6.00		$ 6.00
12/31/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 12/15/03-01/01/04 18 DAYS AVERAGE YIELD .59 %.	3.59		3.59
Total Bank Deposit Program Interest earned			$ 9.59	$ 0.00	$ 9.59

Capital gains distributions

Date	Description	Comment	Long Term	Short Term	Amount
12/30/03	SMITH BARNEY SMALL CAP VALUE FUND CLASS B	L/T CAP GAIN DISTRIBUTION RECORD 12/26/03 PAY 12/30/03	$ 150.62		$ 150.62
12/30/03	SMITH BARNEY SMALL CAP VALUE FUND CLASS B	S/T CAP GAIN DISTRIBUTION RECORD 12/26/03 PAY 12/30/03		33.00	33.00
Total income from capital gains distributions			$ 150.62	$ 33.00	$ 183.62

Message: *Please note that Smith Barney is required by law to report the December 31, 2003 Fair Market Value of this account to the Internal Revenue Service. Smith Barney will forward this information to the IRS on or before May 31, 2004 on IRS Form 5498*

Message: *IRA IMPORTANT NOTICE INSERT- Please review and retain the Notice regarding updates to your Smith Barney IRA or ESA that is included with your statement this month.*

SMITH BARNEY FMA (B)

SMITH BARNEY citigroup

Select Client FMA PLUS Statement

December 1 - December 31, 2003

Ref 00002148 00010615

LESLIE P GORDON

Account number [redacted]

Additional summary information	This period	This year
FRGN tax withheld	$ 0.00	$ 5.64

Gain/loss summary	This period	This year
Realized gain or (loss)	$ 2,880.74	$ 3,462.44 LT $ 0.00 ST
Unrealized gain or (loss)	[redacted]	*Not applicable*

PORTFOLIO DETAILS *The values of your holdings are as of 12/31/03.*

Dividend yield is the estimated annual income generated by securities in your account, including current dividend, divided by the security's market price at the end of the statement period
We do not guarantee the accuracy of prices reflected on this statement nor do these prices represent levels at which securities can be bought or sold
***Please note:** unrealized gain/(loss) is being calculated for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor*

Bank Deposit Program℠

Balances are FDIC insured up to $100,000 per institution, subject to combined total of all your deposits, including those outside this account

Principal	Description	Current value	Accrued interest	Annualized % return	Anticipated income (annualized)
96,526.74	CITIBANK NA BANK DEPOSIT PROGRAM	$ 96,526.74		.60%	$ 579.16
87,819.04	CITIBANK NEVADA BANK DEPOSIT PROGRAM	$ 87,819.04		.60%	$ 526.91
Total Bank Deposit Program		$ 184,345.78	$ 0.00	.60%	$ 1,106.07

Common stocks & options

The research rating for Standard & Poor's may be shown for certain securities. All research ratings represent the "opinions" of the research provider and are not representations or guarantees of performance
Smith Barney Citigroup's research ratings may be shown for certain securities. Smith Barney's stock recommendations include an investment rating and a risk rating. The Investment Rating Code (1, 2 or 3) is a function of Smith Barney's expectation of total return (forecast price appreciation and dividend yield within the next 12 months) and a Risk Rating. The Risk Rating (L, M, H or S) represents the stock's expected risk, taking into account price volatility and fundamental criteria. Please refer to the end of this statement for a guide describing our research ratings.

Quantity	Description	Symbol	Date acquired		Share cost	Current price	Current value		Average % yield	Anticipated Income (annualized)
300	CISCO SYS INC RATING B + Research rating 1/H	CSCO	03/29/99	[redacted]	[redacted]	[redacted]	$ 7,269.00	[redacted]		
133	CITIGROUP INC	C	12/29/99				6,455.82			
500			07/25/02				24,270.00		2.884	886.20
833							30,725.82			
500	CREDIT SUISSE GROUP ADR Research rating 1/H	CSR	03/15/02				18,166.00		134	24.60

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SMITH BARNEY citigroup

(B)

Ref 00002148 00010616

Select Client
FMA PLUS Statement
December 1 - December 31, 2003

LESLIE P GORDON *Account number* [redacted]

Common stocks & options *continued*

Quantity	Description	Symbol	Date acquired	[redacted]	[redacted]	[redacted]	Current value	Unrealized gain/(loss)	Average % yield	Anticipated income (annualized)
100	GOLDMAN SACHS GROUP INC Research rating 2/H	GS	08/06/99	[redacted]	[redacted]	[redacted]	$ 9,873.00	[redacted]	1.012%	$ 100.00
150	HOME DEPOT INC RATING: A + Research rating 1/L	HD	03/29/99	[redacted]	[redacted]	[redacted]	5,323.50	[redacted]	.788	42.00
180	INTEL CORP RATING A Research rating 1/M	INTC	06/21/99	[redacted]	[redacted]	[redacted]	5,769.00	[redacted]	.249	14.40
100	INTL BUSINESS MACHINES CORP RATING B Research rating 3/M	IBM	12/29/99	[redacted]	[redacted]	[redacted]	9,268.00	[redacted]	.69	64.00
200	KEYCORP -NEW RATING A Research rating 2/M	KEY	10/19/00	[redacted]	[redacted]	[redacted]	5,864.00	[redacted]	4.16	244.00
50,000	KORN/FERRY INTL NEW RATING C	KFY		[redacted]	[redacted]	[redacted]	[redacted] $900,000 - $1,000,000	[redacted]		
250	KRAFT FOODS INC CLASS A	KFT	06/12/01	[redacted]	[redacted]	[redacted]	8,055.00	[redacted]		
250	Research rating 3/M		06/12/01	[redacted]	[redacted]	[redacted]	8,055.00	[redacted]		
500				[redacted]	[redacted]	[redacted]	16,110.00	[redacted]	2.234	360.00
400	LIBERTY MEDIA CORP A Research rating 1/M	L	04/19/99	[redacted]	[redacted]	[redacted]	4,756.00	[redacted]		
14	MCDATA CORP CLASS A	MCDTA	03/29/99	[redacted]	[redacted]	[redacted]	133.42	[redacted]		
200	MERRILL LYNCH & CO INC RATING A- Research rating 1/M	MER	05/08/02	[redacted]	[redacted]	[redacted]	11,730.00	[redacted]	1.091	128.00
200	MORGAN STANLEY	MWD	05/08/02	[redacted]	[redacted]	[redacted]	11,574.00	[redacted]		
500	RATING A-		07/25/02	[redacted]	[redacted]	[redacted]	28,935.00	[redacted]		
700	Research rating 1/M			[redacted]	[redacted]	[redacted]	40,509.00	[redacted]	1.728	700.00
150	PFIZER INC RATING: A + Research rating 2/M	PFE	06/08/99	[redacted]	[redacted]	[redacted]	5,299.50	[redacted]	1.924	102.00
50	PROCTER & GAMBLE CO RATING A Research rating 1/L	PG	06/04/99	[redacted]	[redacted]	[redacted]	4,994.00	[redacted]	1.822	91.00
1	SMUCKER J M CO NEW RATING B +	SJM	06/04/99	[redacted]	[redacted]	[redacted]	45.29	[redacted]	2.031	.92
5.673	TRAVELERS PPTY CAS CORP CL A	TAPA	12/29/99	[redacted]	[redacted]	[redacted]	95.19	[redacted]		
21.327	Research rating 1/H		07/25/02	[redacted]	[redacted]	[redacted]	357.87	[redacted]		
27				[redacted]	[redacted]	[redacted]	453.06	[redacted]	1.907	8.64

LESLIE P GORDON

Account number [redacted]

Common stocks & options *continued*

Quantity	Description	Symbol	Date acquired	[redacted]	Current value	[redacted]	Average % yield	Anticipated Income (annualized)
11.7662	TRAVELERS PPTY CAS CORP CL B	TAP B	12/29/99		$ 199.67			
44.2338	Research rating 1/H		07/25/02		750.65			
56					950.32		1.885	17.92
200	WACHOVIA CORP 2ND NEW RATING: A Research rating 2/M	WB	10/19/00		9,318.00		3.004	280.00
Total common stocks and options				[redacted]	[redacted]	[redacted]		$ 3,063.68

Closed end funds

The research rating for Standard & Poor's may be shown for certain securities. All research ratings represent the "opinions" of the research provider and are not representations or guarantees of performance.

Smith Barney Citigroup's research ratings may be shown for certain closed-end funds. Smith Barney's closed-end fund recommendations include an investment rating and a risk rating. The Investment Rating Code (1, 2 or 3) is based upon Smith Barney's expectation of the security's performance relative to its peer group of closed-end funds. The Risk Rating (L, M, H or S) represents the fund's expected risk, taking into account the quality and liquidity of the underlying securities, financial leverage and foreign currency exposure. Please refer to the end of this statement for a guide describing our research ratings.

Closed end investment companies are grouped below by our portfolio designations. Gain/Loss is provided to assist in tax preparation. It is not intended to calculate investment returns or performance.

Quantity	Description	Symbol	Date acquired	[redacted]	Current value	Unrealized	Average % yield	Anticipated Income (annualized)
241	NASDAQ 100 TRUST-SER 1 Equity portfolio	QQQ	04/11/01	[redacted]	$ 8,786.89	[redacted]	.038 %	$ 3.37
200	UTS SPDR TRUST SER 1 Equity portfolio	SPY	06/14/01		22,256.00	[redacted]	1.852	412.40
Total closed end fund equity allocation					[redacted]			
Total closed end funds				[redacted]			1.33	$ 415.77

Other investments

Quantity	Description	Symbol	Date acquired	[redacted]	Current value	[redacted]	Average % yield	Anticipated Income (annualized)
1,000	TIERS PRINCIPAL PROTECTED ASSET-BACKED CTFS TR SR NASDAQ 100 INDEX 2001 B		04/11/01	[redacted]	$ 9,730.00	[redacted]		
Total other investments				[redacted]	$ 9,730.00			

SMITH BARNEY citigroup

Ref 00002148 00010618

(b)

Select Client
FMA PLUS Statement
December 1 - December 31, 2003

LESLIE P GORDON

Account number [redacted]

Certificates of deposit

Pursuant to FDIC rules, certificates of deposit ("CDs") are insured up to to a maximum of $100,000 per depository institution (principal and interest combined) when aggregated with other deposits held in the same insurable capacity at the the depository institution. The market value of any CD on this statement is determined using a matrix based on interest rates. If a CD cannot be priced a matrix based on interest rates If a CD cannot be priced using this method, the statement will not reflect a market value for the CD. The market value is only an estimate and may not reflect the actual price you would receive if you were able to sell your CD prior to maturity. Deposit insurance is based on the outstanding principal amount of the CD, or the accreted value in the case of a zero coupon CD, not the estimated market value.

Issuer names followed by a "C" indicate that issuer is an affiliate of Citigroup Global Markets Inc.

Amount	Description	Date acquired	Cost/ Adjusted cost	Share cost/ Adjusted share cost	Current share price	Current value/ Maturity value	Unrealized Gain/(loss) Original/Adjusted		Current % Yield/ Anticip. Income (annualized)	Ordinary Income/ Capital gain/(loss)
50,000	PROVIDENT BANK - OH DTD 04/10/02 INT SEMI-ANN INT 04.000% MATY 04/12/2004 Accrued interest of $ 449 31	03/26/02	[redacted]	[redacted]	100 668	$ 50,334.00 $ 50,000 00	$ 334.00 $ 334.00	LT LT	3.973 $ 2,000.00	$ 0.00 $ 334.00
Total certificates of deposit 50,000			[redacted]			$ 50,334.00	$ 0.00 $ 334 00	ST LT	3.97 $ 2,000 00	$ 0.00 $ 334.00
Total portfolio value			[redacted]			[redacted]			159 21 $ 8,566.42	$ 0.00 $ 334.00

**Based on information supplied by client or other financial institution, not verified by us.*

***Unrealized Gain/Loss is only calculated when an original cost basis is available.*

TRANSACTION DETAILS *All dates of transactions appearing on this statement are settlement dates.*

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/09/03	Sold	BANK OF AMERICA CORP	-100	$ 75 40	$ 7,435.19
12/15/03	Sold	KORN/FERRY INTL NEW	-2,500	11.40	28,255.84
12/15/03	Sold	KORN/FERRY INTL NEW	-1,000	11.45	11,351.90
12/15/03	Sold	KORN/FERRY INTL NEW	-2,500	11.451	28,377.73
12/16/03	Sold	KORN/FERRY INTL NEW	-1,000	12.156	11,988.42
12/18/03	Sold	KORN/FERRY INTL NEW	-1,000	12.34	12,171.12
12/19/03	Sold	KORN/FERRY INTL NEW	-1,000	12.38	12,210.84
12/24/03	Sold	KORN/FERRY INTL NEW	-1,584	12.85	20,106.46
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					[redacted]

SMITH BARNEY citigroup

Select Client
FMA PLUS Statement
April 1 - April 30, 2003

Ref 00000346 00002113

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LESLIE P GORDON

Account numbe[redacted]

Certificates of deposit

Pursuant to FDIC rules, certificates of deposit ("CDs") are insured up to to a maximum of $100,000 per depository institution (principal and interest combined) when aggregated with other deposits held in the same insurable capacity at the the depository institution. The market value of any CD on this statement is determined using a matrix based on interest rates. If a CD cannot be priced using this method, the statement will not reflect a market value for the CD. The market value is only an estimate and may not reflect the actual price you would receive if you were were able to sell your CD prior to maturity. Deposit insurance is based on the outstanding principal amount of the CD, or the accreted value in the case of a zero coupon CD, not the estimated market value.

Amount	Description	Date acquired	Cost/ Adjusted cost	Share cost/ Adjusted share cost	Current share price	Current value/ Maturity value	Unrealized Gain/(loss) Original/Adjusted	Current % Yield/ Anticip. Income (annualized)	Ordinary Income/ Capital gain/(loss)
50[redacted]	[redacted]	03/26/02	[redacted]	[redacted]	101.611	[redacted]	[redacted]	[redacted]	[redacted]
Total certificates of deposit			[redacted]			[redacted]	[redacted]		[redacted]
50,000									
Total portfolio value			[redacted]			[redacted]	[redacted]		[redacted]

***Unrealized Gain/Loss is only calculated when an original cost basis is available*

**Based on information supplied by client or other financial institution, not verified by us*

Transaction details *All dates of transactions appearing on this statement are settlement dates.*

Investment activity

Date	Activity	Description	Quantity	Price	Amount
04/14/03	Sold	SMITH BARNEY AAA ENERGY FUND L P AS OF 03/31/03	29 1995	$ 1,732 28	$ 50,581 70
Total securities bought and other subtractions					[redacted]
Total securities sold and other additions					

Withdrawals

Date	Description	Reference no.	Amount	Date	Description	Reference no	Amount
04/[redacted]	[redacted]	[redacted]		04/11/03	$25 MONEY TRANSFER FEE WAIVED		0 00
					Total withdrawals		[redacted]

SMITH BARNEY citigroup

Ref. 00000340 00002233

Select Client FMA PLUS Statement

July 1 - July 31, 2003

LESLIE P GORDON

Account numbe[redacted]

Certificates of deposit

Pursuant to FDIC rules, certificates of deposit ("CDs") are insured up to to a maximum of $100,000 per depository institution (principal and interest combined) when aggregated with other deposits held in the same insurable capacity at the the depository institution. The market value of any CD on this statement is determined using a matrix based on interest rates. If a CD cannot be priced using this method, the statement will not reflect a market value for the CD. The market value is only an estimate and may not reflect the actual price you would receive if you were were able to sell your CD prior to maturity. Deposit insurance is based on the outstanding principal amount of the CD, or the accreted value in the case of a zero coupon CD, not the estimated market value.

Issuer names followed by a "C" indicate that issuer is an affiliate of Citigroup Global Markets Inc.

Amount	Description	Date acquired	Cost/ Adjusted cost	Share cost/ Adjusted share cost	Current share price	Current value/ Maturity value	Unrealized Gain/(loss) Original/Adjusted	Current % Yield/ Anticip. Income (annualized)	Ordinary Income/ Capital gain/(loss)
50,000	PROVIDENT BANK - OH DTD 04/10/02 INT SEMI-ANN INT 04.000% MATY 04/12/2004 Accrued interest of $ 613.69	03/26/02	[redacted]	$ 100.00 $ 100.00	101.373	[redacted]	[redacted]	[redacted]	[redacted]
Total certificates of deposit 50,000			[redacted]			[redacted]	[redacted]	[redacted]	[redacted]
Total portfolio value						[redacted]			

**Based on information supplied by client or other financial institution, not verified by us*

***Unrealized Gain/Loss is only calculated when an original cost basis is available*

Transaction details

All dates of transactions appearing on this statement are settlement dates

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/21/03	Sold	KORN/FERRY INTL NEW	-500	$ 9.69	$ 4,753.11
07/21/03	Sold	KORN/FERRY INTL NEW	-500	9.68	4,748.20
07/21/03	Sold	KORN/FERRY INTL NEW	-500	9.68	4,748.20
07/21/03	Sold	KORN/FERRY INTL NEW	-500	9.65	4,733.48
07/21/03	Sold	KORN/FERRY INTL NEW	-500	9.642	4,729.56
07/21/03	Sold	KORN/FERRY INTL NEW	-500	9.64	4,723.58
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					[redacted]

Deposits

Date	Description	Amount	Date	Description	Amount
07[redacted]		[redacted]			

LESLIE P GORDON

Account numb[redacted]

Certificates of deposit

Pursuant to FDIC rules, certificates of deposit ("CDs") are insured up to to a maximum of $100,000 per depository institution (principal and interest combined) when aggregated with other deposits held in the same insurable capacity at the the depository institution. The market value of any CD on this statement is determined using a matrix based on interest rates. If a CD cannot be priced using this method, the statement will not reflect a market value for the CD. The market value is only an estimate and may not reflect the actual price you would receive if you were were able to sell your CD prior to maturity. Deposit insurance is based on the outstanding principal amount of the CD, or the accreted value in the case of a zero coupon CD, not the estimated market value.
Issuer names followed by a "C" indicate that issuer is an affiliate of Citigroup Global Markets Inc.

Amount	Description	Date acquired	Cost/ Adjusted cost	Share cost/ Adjusted share cost	Current share price	Current value/ Maturity value	Unrealized Gain/(loss) Original/Adjusted	Current % Yield/ Anticip. Income (annualized)	Ordinary Income/ Capital gain/(loss)
50,000	PROVIDENT BANK - OH DTD 04/10/02 INT SEMI-ANN INT 04.000% MATY 04/12/2004 Accrued interest of $ 772.60	03/26/02	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
Total certificates of deposit						[redacted]	[redacted]	[redacted]	[redacted]
50,000									
Total portfolio value						[redacted]	[redacted]	[redacted]	[redacted]

**Based on information supplied by client or other financial institution, not verified by us.*

***Unrealized Gain/Loss is only calculated when an original cost basis is available.*

Transaction details *All dates of transactions appearing on this statement are settlement dates.*

Investment activity

Date	Activity	Description	Quantity	Price	Amount
08/05/03	Sold	KORN/FERRY INTL NEW	-1,000	$ 10.66	$ 10,412.03
08/22/03	Sold	KORN/FERRY INTL NEW	-1,000	10.49	10,334.14
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					[redacted]

Other security activity

Date	Activity	Description	Quantity	Value
08/20/03	Receive	KORN/FERRY INTL NEW ACCT-TRANSFRD-08 20 03 PERSHING	68,988	[redacted] 500,000 - #1,000,000
Net value of securities deposited/withdrawn				[redacted]

1627

SMITH BARNEY citigroup

Ref 00015518 00082005

Select Client Education Savings Account

December 1 - December 31, 2003

579L037116817000001551 8 303365AB01 WEB00579A
LESLIE P GORDON
CGM EDUCATION SAVINGS ACCOUNT
FBO PEYTON GORDON
[redacted]

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant
[redacted]

Account numb[redacted]

Select Service Center: 1-800-423-7248
Branch: 800-862-3108

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Account value

	Last period	This period	%
Bank Deposit Program℠-principal	$ 147.92	$ 147.99	6.23
Bank Deposit Program-accrued interest	.03	0.00	
Closed end funds	2,129.00	2,225.60	93.77
Total value	**$ 2,276.95**	**$ 2,373.59**	**100.00**
Total value (excluding accrued interest)	$ 2,276.92	$ 2,373.59	

Fair Market Value 12/31/03 $ 2,373.59

Cash, money fund, bank deposits

	This period
Opening balance	$ 147.92
Bank Deposit Program℠ interest reinvested	.07
Closing balance	$ 147.99

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

Earnings summary

	This period	This year
Dividends	$ 0.00	$ 22.30
Bank Deposit Program℠	.07	.54
Total	$ .07	$ 22.84

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	($ 180.45)	*Not applicable*

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	$ 2,276.92	$ 1,881.03
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	0.00
Beginning value net of deposits/withdrawals	2,276.92	1,881.03
Total income	.07	22.84
Asset appreciation	96.60	469.72
Total value as of 12/31/2003 (excl. accr. int.)	$ 2,373.59	$ 2,373.59
Total return	$ 96.67	$ 492.56

1628

Select Client Education Savings Account

December 1 - December 31, 2003

LESLIE P GORDON

Account number [redacted]

EDUCATION SAVINGS ACCOUNT ACTIVITY SUMMARY

We report to the IRS total contributions, rollovers, and distributions. The following summary of contributions, rollovers, distributions, and transfers made into and out of this Education Savings Account is provided for your convenience.

Note: Federal law limits total contributions to an ESA to $2,000 per year.

	2003	2002	Since Inception*
Contributions			
Non-deductible	$ 0.00	$ 2,000.00	$ 2,600.00
Total contributions	$ 0.00	$ 2,000.00	$ 2,600.00

**Note: This column is provided for informational purposes only. It reflects activity from your account opening date or 01/01/94, whichever is later, unless you provide details of prior activity. The column does not include incoming or outgoing transfers of cash and securities. Please contact your Financial Consultant if you wish to adjust this column. We are not responsible for any information you provide.*

PORTFOLIO DETAILS

The values of your holdings are as of 12/31/03.

Dividend yield is the estimated annual income generated by securities in your account, including current dividend, divided by the security's market price at the end of the statement period. We do not guarantee the accuracy of prices reflected on this statement nor do these prices represent levels at which securities can be bought or sold.

***Please note:** unrealized gain/(loss) is being calculated for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.*

Bank Deposit Program℠

Balances are FDIC insured up to $100,000 per institution, subject to combined total of all your deposits, including those outside this account.

Principal	Description	Current value	Accrued interest	Annualized % return	Anticipated Income (annualized)
147.99	CITIBANK NA BANK DEPOSIT PROGRAM	$ 147.99		.60%	$ .88
Total Bank Deposit Program		$ 147.99	$ 0.00	.60%	$ .88

LESLIE P GORDON

Account number [redacted]

Closed end funds

The research rating for Standard & Poor's may be shown for certain securities All research ratings represent the "opinions" of the research provider and are not representations or guarantees of performance

Smith Barney Citigroup's research ratings may be shown for certain closed-end funds Smith Barney's closed-end fund recommendations include an investment rating and a risk rating. The Investment Rating Code (1, 2 or 3) is based upon Smith Barney's expectation of the security's performance relative to its peer group of closed-end funds. The Risk Rating (L, M, H or S) represents the fund's expected risk, taking into account the quality and liquidity of the underlying securities, financial leverage and foreign currency exposure. Please refer to the end of this statement for a guide describing our research ratings.

Closed end investment companies are grouped below by our portfolio designations Gain/Loss is provided to assist in tax preparation It is not intended to calculate investment returns or performance

Quantity	Description	Symbol	Date acquired	Cost	Share cost	Current price	Current value	Unrealized gain/(loss)	Average % yield	Anticipated Income (annualized)
20	UTS SPDR TRUST SER 1 Equity portfolio	SPY	01/04/02	$ 2,406.05	$ 116.85	$ 111.28	$ 2,225.60	($ 180.45) LT	1.852 %	$ 41.24
Total closed end fund equity allocation							$ 2,225.60			
Total closed end funds				$ 2,406.05			$ 2,225.60	$ 0.00 ST ($ 180.45) LT	1.85	$ 41.24
Total portfolio value				$ 2,554.04			$ 2,373.59	$ 0.00 ST ($ 180.45) LT	1.77	$ 42.12

EARNINGS DETAILS

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Bank Deposit Program Interest℠

This section contains interest credited to your account Accrued interest is not included. See Portfolio details section for accrued interest information.

Date	Description	Comment	Taxable	Non-taxable	Amount
12/12/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 11/17/03-12/14/03 28 DAYS AVERAGE YIELD .62 %.	$ .05		$ .05
12/31/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 12/15/03-01/01/04 18 DAYS AVERAGE YIELD .59 %.	.02		.02
Total Bank Deposit Program Interest earned			$ .07	$ 0.00	$ .07

1630

SMITH BARNEY citigroup

Ref 00005714 00028749

Select Client Statement

December 1 - December 31, 2003

579L037111102200005714 303365AB01 WEB00579A
LESLIE P GORDON ACF
PEYTON GORDON U/DC/UTMA
[redacted]

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant
[redacted]

Account number [redacted]

Select Service Center: 1-800-423-7248
Branch: 800-662-3108

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Account value

	Last period	This period	%
Bank Deposit Program℠-principal	$ 22,820.76	$ 22,838.27	54.69
Bank Deposit Program-accrued interest	5.47	0.00	
Closed end funds	18,096.50	18,917.60	45.31
Total value	**$ 40,922.73**	**$ 41,755.87**	**100.00**
Total value (excluding accrued interest)	$ 40,917.26	$ 41,755.87	

Cash, money fund, bank deposits

	This period
Opening balance	**$ 22,820.76**
Bank Deposit Program℠ Interest reinvested	17.51
Closing balance	**$ 22,838.27**

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

Earnings summary

	This period		This year	
	Taxable	Non-taxable	Taxable	Non-taxable
Dividends	$ 0.00	$ 0.00	$ 189.49	$ 0.00
Bank Deposit Program interest	17.51	0.00	151.40	0.00
Total	$ 17.51	$ 0.00	$ 340.89	$ 0.00

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	($ 954.45)	*Not applicable*

Portfolio summary

	This period	This year
Beginning total value (excl. accr. int.)	$ 40,917.26	$ 37,422.39
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	0.00	0.00
Beginning value net of deposits/withdrawals	40,917.26	37,422.39
Total income	17.51	340.89
Asset appreciation	821.10	3,992.59
Total value as of 12/31/2003(excl. accr. int.)	$ 41,755.87	$ 41,755.87
Total return	$ 838.61	$ 4,333.48

SMITH BARNEY citigroup

Ref 00005714 00028750

Select Client Statement

December 1 - December 31, 2003

LESLIE P GORDON ACF

Account number [redacted]

PORTFOLIO DETAILS

The values of your holdings are as of 12/31/03.

Dividend yield is the estimated annual income generated by securities in your account, including current dividend, divided by the security's market price at the end of the statement period.
We do not guarantee the accuracy of prices reflected on this statement nor do these prices represent levels at which securities can be bought or sold.
***Please note:** unrealized gain/(loss) is being calculated for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.*

Bank Deposit Program℠

Balances are FDIC insured up to $100,000 per institution, subject to combined total of all your deposits, including those outside this account

Principal	Description	Current value	Accrued interest	Annualized % return	Anticipated income (annualized)
22,838 27	CITIBANK NA BANK DEPOSIT PROGRAM	$ 22,838.27		.60%	$ 137.02
Total Bank Deposit Program		$ 22,838.27	$ 0.00	.60%	$ 137.02

Closed end funds

The research rating for Standard & Poor's may be shown for certain securities. All research ratings represent the "opinions" of the research provider and are not representations or guarantees of performance
Smith Barney Citigroup's research ratings may be shown for certain closed-end funds. Smith Barney's closed-end fund recommendations include an investment rating and a risk rating. The Investment Rating Code (1, 2 or 3) is based upon Smith Barney's expectation of the security's performance relative to its peer group of closed-end funds. The Risk Rating (L, M, H or S) represents the fund's expected risk, taking into account the quality and liquidity of the underlying securities, financial leverage and foreign currency exposure. Please refer to the end of this statement for a guide describing our research ratings.

Closed end investment companies are grouped below by our portfolio designations Gain/Loss is provided to assist in tax preparation. It is not intended to calculate investment returns or performance

Quantity	Description	Symbol	Date acquired	Cost	Share cost	Current price	Current value	Unrealized gain/(loss)	Average % yield	Anticipated Income (annualized)
170	UTS SPDR TRUST SER 1 Equity portfolio	SPY	12/27/01	$ 19,872.05	$ 115.76	$ 111.28	$ 18,917.60	($ 954.45) LT	1.852%	$ 350.54
Total closed end fund equity allocation							$ 18,917.60			
Total closed end funds				$ 19,872.05			$ 18,917.60	$ 0.00 ST ($ 954.45) LT	1.85	$ 350.54
Total portfolio value				$ 42,710.32			$ 41,755.87	$ 0.00 ST ($ 954.45) LT	1.18	$ 487.56

1632

SMITH BARNEY citigroup

Ref 00005714 00028751

Select Client Statement

December 1 - December 31, 2003

LESLIE P GORDON ACF

Account number [redacted]

EARNINGS DETAILS

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Bank Deposit Program Interest℠

This section contains interest credited to your account. Accrued interest is not included. See Portfolio details section for accrued interest information.

Date	Description	Comment	Taxable	Non-taxable	Amount
12/12/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 11/17/03-12/14/03 28 DAYS AVERAGE YIELD .62 %	$ 10.91		$ 10.91
12/31/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 12/15/03-01/01/04 18 DAYS AVERAGE YIELD .59 %	6.60		6.60
Total Bank Deposit Program Interest earned			$ 17.51	$ 0.00	$ 17.51

Guide to Investment Ratings

Closed-End Fund Ratings

Investment ratings are a function of Smith Barney's expectation of the fund's total return relative to its peer group and the ability to provide stable to rising dividends, where applicable.

Code	Rating	Expected Total Return
1	Outperform	Expected to outperform its peer group of closed-end funds, and/or the fund is expected to provide stable to rising dividends, where applicable
2	In-Line	Expected to perform in line with its peer group of closed-end funds, and/or the fund is expected to provide stable dividends, where applicable
3	Underperform	Expected to underperform its peer group of closed-end funds, and/or the fund is expected to provide a declining dividend, where applicable

Closed-End Fund Risk

Takes into account the quality and liquidity of the underlying securities, financial leverage and foreign currency exposure

Code	Rating	Definitions
L	Low	The fund invests in high quality, liquid securities with little to no financial leverage or foreign currency exposure
M	Medium	Overall, the fund invests in moderate to high quality, liquid securities with reasonable financial leverage and provides primarily United States Dollar currency exposure
H	High	The fund may invest in low quality, less-liquid securities, have exposure to foreign currencies and above average degrees of financial leverage
S	Speculative	The fund invests in low grade, illiquid and/or highly volatile securities, have exposure to foreign currency and may also use high degrees of financial leverage

Information regarding commissions and charges will be made available to you promptly upon request. Please advise us of any material change in your financial objectives or financial situation. All checks written and deposited to your account must be made payable to Smith Barney.
If you believe your statement is not correct, you must contact us within ten (10) days. Complaints and incorrect statement issues may be directed to the Manager of the branch servicing your account (see page 1 of statement for address and phone number) or Citigroup Global Markets Inc., Attention: Compliance Department, 77 Water Street, 19th Floor, New York, NY 10005.

1633

SMITH BARNEY citigroup

E

Select Client Financial Management Account

December 1 - December 31, 2003

Ref 00005715 00028752

Account number [redacted]

579L03711110250000057 15 303365AB01 WEB00579A
LESLIE P GORDON AND
BARTON JENNINGS GORDON JTWROS
[redacted]

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant
[redacted]

Select Service Center: 1-800-423-7248
Branch: 800-662-3108
TTY/TDD Deaf & Hard of hearing: 800-227-4238

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Account value	Last period	This period	%
Bank Deposit Program℠-principal	$ 51,769.06	$ 31,462.85	100.00
Bank Deposit Program-accrued interest	12.40	0.00	
Total value	**$ 51,781.46**	**$ 31,462.85**	**100.00**
Total value (excluding accrued interest)	$ 51,769.06	$ 31,462.85	

Cash, money fund, bank deposits	This period	This year
Opening balance	$ 51,769.06	
Deposits	1,653.60	23,309.40
Withdrawals	(22,000.00)	(22,000.00)
Bank Deposit Program℠ interest reinvested	40.19	
Closing balance	$ 31,462.85	

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

Earnings summary	This period Taxable	This period Non-taxable	This year Taxable	This year Non-taxable
Bank Deposit Program interest	$ 40.19	$ 0.00	$ 279.37	$ 0.00
Total	$ 40.19	$ 0.00	$ 279.37	$ 0.00

Gain/loss summary	This period	This year
Unrealized gain or (loss)	$ 0.00	*Not applicable*

Portfolio summary	This period	This year
Beginning total value (excl. accr. int.)	$ 51,769.06	$ 29,874.06
Net security deposits/withdrawals	0.00	0.00
Net cash deposits/withdrawals	(20,346.40)	1,309.40
Beginning value net of deposits/withdrawals	31,422.66	31,183.48
Total income	40.19	279.37
Asset appreciation	0.00	0.00
Total value as of 12/31/2003(excl. accr. int.)	$ 31,462.85	$ 31,462.85
Total return	$ 40.19	$ 279.37

SMITH BARNEY citigroup

Ref 00005715 00028753

Select Client Financial Management Account

December 1 - December 31, 2003

LESLIE P GORDON AND

Account numbe[redacted]

PORTFOLIO DETAILS

The values of your holdings are as of 12/31/03.

Dividend yield is the estimated annual income generated by securities in your account, including current dividend, divided by the security's market price at the end of the statement period
We do not guarantee the accuracy of prices reflected on this statement nor do these prices represent levels at which securities can be bought or sold
***Please note:** unrealized gain/(loss) is being calculated for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor*

Bank Deposit Program℠

Balances are FDIC insured up to $100,000 per institution, subject to combined total of all your deposits, including those outside this account.

Principal	Description	Current value	Accrued interest	Annualized % return	Anticipated income (annualized)
31,462.85	CITIBANK NA BANK DEPOSIT PROGRAM	$ 31,462.85		.60%	$ 188.77
Total Bank Deposit Program		$ 31,462.85	$ 0.00	.60%	$ 188.77

TRANSACTION DETAILS

All dates of transactions appearing on this statement are settlement dates.

Deposits

Date	Description	Amount
12/12/03	DEPOSIT RECEIVED AT 00579 - RED BANK, N J	1,853.60

Date	Description	Amount

Withdrawals

Date	Description	Reference no	Amount
12/31/03	FROM 579 11025-01 TO 579 20320-01		22,000.00

Date	Description	Reference no.	Amount

Bank Deposit Program℠ activity

	Opening balance		$ 51,769.06
Date	Activity	Description	Amount
12/15/03	Autodeposit	BANK DEPOSIT PROGRAM	1,853.60

Date	Activity	Description	Amount
12/31/03	Withdrawal	BANK DEPOSIT PROGRAM	-22,000.00
		BANK DEPOSIT PROGRAM INTEREST CREDITED (SEE DETAILS UNDER EARNINGS DETAILS)	40.19
		Closing balance	$ 31,462.85

SMITH BARNEY citigroup

(9)

Select Client
Financial Management Account
December 1 - December 31, 2003

LESLIE P GORDON AND

Account number [redacted]

EARNINGS DETAILS

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Bank Deposit Program Interest℠

This section contains interest credited to your account. Accrued interest is not included. See Portfolio details section for accrued interest information.

Date	Description	Comment	Taxable	Non-taxable	Amount
12/12/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 11/17/03-12/14/03 28 DAYS AVERAGE YIELD .62 %	$ 24.79		$ 24.79
12/31/03	CITIBANK NA BANK DEPOSIT PROGRAM	REINVESTED FOR PERIOD 12/15/03-01/01/04 18 DAYS AVERAGE YIELD .59 %	15.40		15.40
Total Bank Deposit Program Interest earned			$ 40.18	$ 0.00	$ 40.18

Information regarding commissions and charges will be made available to you promptly upon request. Please advise us of any material change in your financial objectives or financial situation. All checks written and deposited to your account must be made payable to Smith Barney.
If you believe your statement is not correct, you must contact us within ten (10) days. Complaints and incorrect statement issues may be directed to the Manager of the branch servicing your account (see page 1 of statement for address and phone number) or Citigroup Global Markets Inc., Attention: Compliance Department, 77 Water Street, 19th Floor, New York, NY 10005.

SMITH BARNEY citigroup

Ref: 00010281 00051560

Select Client Statement

December 31, 2003

579L037112032000010281 303365AB01 WEB00579A
LESLIE GORDON& KATHRYN PEYTON,
TTEES-IRREVOCABLE TRUST
TR D/T/D 03/28/2003
FBO PEYTON MARGARET GORDON
[redacted]

Your Broker/Dealer is
CITIGROUP GLOBAL MKTS INC.
Your Financial Consultant
[redacted]

Account numb[redacted]

Select Service Center: 1-800-423-7248
[redacted]

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Account value	Last period	This period
Cash balance	$ 0.00	$ 22,000.00
Total value	**$ 0.00**	**$ 22,000.00**

Cash, money fund, bank deposits	This period	This year
Opening balance	$ 0.00	
Deposits	22,000.00	22,000.00
Closing balance	$ 22,000.00	

A free credit balance in any securities account may be paid to you on demand. Although properly accounted for on our books and records, these funds may be used for our business purposes.

TRANSACTION DETAILS

All dates of transactions appearing on this statement are settlement dates.

Deposits

Date	Description	Amount
12/31/03	FROM 579-11025-01 TO 579-20320-01	22,000.00

Date	Description	Amount

Information regarding commissions and charges will be made available to you promptly upon request. Please advise us of any material change in your financial objectives or financial situation. All checks written and deposited to your account must be made payable to Smith Barney.
If you believe your statement is not correct, you must contact us within ten (10) days. Complaints and incorrect statement issues may be directed to the Manager of the branch servicing your account (see page 1 of statement for address and phone number) or Citigroup Global Markets Inc., Attention: Compliance Department, 77 Water Street, 19th Floor, New York, NY 10005.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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Porter J. Goss
(Full Name)

P.O. Box 248
Sanibel, Florida
(Mailing Address)

Daytime Telephone: 202-225-2536

Filer Status	[X] Member of the U.S. House of Representatives — State: FL District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		1 June '04

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Name Porter Goss | Page 2 of 24

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II.

Name Porter Goss | Page 3 of 24

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 - $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction S, P, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X								P
	Examples: DC Simon & Schuster			Indefinite																Royalties									X			
	Examples: JT 1st Bank of Paducah, KY accounts						X									X									X							
SP	Berkshire Life Ins.	X																		Annuity			X									
SP	Nat. Life Vermont Ins.	X																		Annuity				X								
	Lincoln Nat. Life Ins.				X											X				Equity Distribution				X								
SP	Fishers Isl. Utility Co (Stock)				X									X									X									
JT	Edison Community Bank of the Islands (checked)			X												X						X										
JT	Fishers Isl. Dev. Co. (stock)				X															None	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Goss

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Fifth Third Bank (checking)	X																		Acct closed												checking closed
JT	Fifth Third Bank (stock)				X									X			X			(loss)		X										S (partial)
SP	Charles Oliver Trust							X						X		X	X									X						
JT	Retreat Farm Produce LLC									X										Produce + Grazing Fee	X		(loss)									
JT	Retreat Farm Village Depot LLC Rapidan, VA						X													store receipts	X		loss									
JT	Lee County Elec. Coop (FL)			X																Equity Distribution		X										
JT	Fishers Island NY undeveloped Real estate								X											none	X											
JT	AT&T Corp (stock)			X										X			X						X									S (partial)
	AT&T Wireless Corp	O															X						X									S
SP	Abbott Labs (stock)						X							X											X							P
	Agilent Techs IPO	O															X							X								S
SP	Air Prod & Chemical (stock)							X						X												X						
SP	Alcoa (stock)						X							X										X								
SP	American Int'l Group (stock)					X								X									X									
	Auto Data Processing (stock)				X									X									X									
SP	BP PLC (stock)				X									X										X								
SP	Bank of America (stock)								X					X			X										X					P S (partial)
SP	Bank One Corp (stock)					X								X										X								
SP	BellSouth Corp (stock)				X									X										X								
SP	Blackrock (Inv. Fund) see Bal								X					X		X				sale at loss							X					P, S (partial)
SP	Blackrock PA Muni Fund						X							X						cash management				X								P, S (partial)
JT	Bristol Myers Squibb						X							X			X									X						S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Goss

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SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Burlington Northn. Santa Fe (stk)						X							X											X							
SP	Burlington Resources (stk)						X							X											X							
	Carnival Corp (stk)				X									X									X									E-Manchester
SP	Chev/Texaco Corp (stk)					X								X											X							
SP	Cisco Systems (stk)							X						X							X											P
SP	Citigroup (stk)				X									X										X								P
SP	Coca Cola (stk)								X					X			X										X					S (partial)
SP	Disney (stk)						X							X										X								P
SP	Dow Chemical (stk)							X						X											X							
SP	Dupont (stk)						X							X											X							
SP	El Paso Corp (stk)			X										X									X									
SP	Emerson Electric Co (stk)						X							X											X							
JT	Exxon Mobil Corp (stk)				X									X									X									P
	FPL Group (stk)					X								X											X							
SP	Fannie Mae (stk)						X							X											X							
JT	Fleet Boston (stk)				X									X									X									
JT	General Electric (stk)									X				X			X										X					S (partial)
JT	Gen. Motors (stk)			X										X						loss		X										S (partial)
SP	Georgia Pacific (stk)				X									X									X									
SP	Gillette Co. (stk)					X								X										X								
JT	H.J. Heinz Co (stk)				X									X										X								
	Hewlett-Packard (stk)			X										X			X									X						S (partial)

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Gass

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
SP	Home Depot (stk)	F	DIVIDENDS	V	P
SP	Honeywell Int (stk)	A	DIVIDENDS	VI	S
	Household Int (stk)	G	Non-Cash Exchange to HSBC Holdings		E
SP	Illinois Edl. Facs Auth (Bond)	F	INTEREST	VI	
SP	Illinois Tool Works (stk)	C	DIVIDENDS	II	
JT	Intel Corp (stk)	F	DIVIDENDS	III	S (partial)
JT	IBM (stk)	H	DIVIDENDS	VI	P, S (partial)
JT	Johnson & Johnson (stk)	F	DIVIDENDS; CAPITAL GAINS	V	P, S (partial)
SP	Lackawanna Cnty PA Pub. Housing (Bond)	D	INTEREST	IV	
SP	Lifeline Systems (stk)	D	DIVIDENDS	I	
SP	Lubrizol Corp (stk)	E	DIVIDENDS	IV	
SP	May Dept. Stores (stk)	E	DIVIDENDS	IV	
SP	Merk & Co (stk)	H	DIVIDENDS; CAPITAL GAINS	VII	P, S (partial)
SP	Microsoft Corp (stk)	G	DIVIDENDS	IV	P, S (partial)
SP	Millcreek Twp PA Sewr Auth (Bond)	C	INTEREST; CAPITAL GAINS	IV	S (partial)
SP	Millipore Corp (stk)	E	DIVIDENDS	III	
JT	Motorola Inc (stk)	D	DIVIDENDS	III	S (partial)
SP	Norfolk Southern Corp (stk)	F	DIVIDENDS	IV	
	Oracle Corp (stk)	D	DIVIDENDS	I	
JT	PNC Fin. Serv. Corp (stk)	H	DIVIDENDS	VII	
SP	PPG Industries (stk)	H	DIVIDENDS	VI	
SP	Pepsico (stk)	F	DIVIDENDS; CAPITAL GAINS	VI	S (partial)

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Goss

	SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
	SP	Phillip Morris Co. (stk)	Name Change to Altria Group			
pm	SP	Procter & Gamble (stk)		X	X	P
pm	SP	SBC Communications (stk)	X	X	X	P
		Schering Plough (stk)	O	X	1055 X	S
	SP	Schlumberger LTD (stk)	X	X	X	
	SP	Seattle WA - Gen. Bond	O	X	X	S - Maturit
	SP	3-M Co. (stk)	X	X	X	
pm	SP	Tyco Int' LTD (stk)	X	X X	X	P S (par
	SP	Upper St. Clair PA Schl-Bond	X	X	X	
	JT	Verizon Communications (stk)	X	X X	X	P S (part
pm	SP	Vodafone Grp (stk)	X	X	X X	P
pm	JT	Wal-Mart Stores (stk)	X	X X	X	P S (part
	SP	Wyeth (stk)	X	X X	X	S (partial
	SP	Yum Brands (stk)	X		O	
	JT	Zimmer Holdings (stk)	X		O	
accts 1258, 1636	JT	Federated Gov. Funds	X	Cash equivalent	Cash mgmt and X	P, S (partial)
	SP	Overriding Royalty - Lafourche Parish Great Family Mott	X		Royalty X	X
	SP	W.C. Robinson Jr.	X		Trust X	
	SP	Transocean Inc.	O		1055 X	S
pm	JT	Comcast Corp (stk)	X	X	X	P
	JT	Del Monte Foods (stk)	X	X	X	S
pm *	JT	Dell Computer Inc (stk)	X	X	X	P

* Dell Computer Inc NAME CHANGE to Dell Inc

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Goss

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	Harley Davidson Inc (stk)				X									X								X										S (partial)
SP	Kraft Foods (stk)			X										X						loss			X									
SP	Louisiana St. gast fuel Tax Rev (Bond)					X										X								X								
JT	Northrop Grumman Corp (stk)			X										X			X									X						P, S (rent)
SP	Siebel Systems (stk)			X																	X											
SP	Texas ST. Pub. Fin Auth Rev Bond				X											X							X									
SP	Travelers Prop Casualty A (stk)													X						loss		X										S
SP	Travelers Prop Casualty Corp (stk)			X										X						loss		X										P, S (partial)
JT	Kimberly Clark Corp (stk)			X										X									X									P
SP	Exelon Corp (stk)			X										X								X										P, S
SP	International Paper	O												X			X						X									P
JT	Pfizer Inc. (stk)				X									X									X									P
SP	AmGen Inc (stk)			X										X							X											P
JT	JP Morgan chase (stk)					X								X										X								P
SP	Wachovia 2nd Nav (stk)				X									X																		P
JT	Bed Bath + Beyond (stk)				X									X							X						X					
SP	Altria Group (stk)					X								X																		E
	HSBC Holdings PLC (stk)				X									X										X								P
SP	Stryker Corp			X										X								X										S (partial)
SP	Medco Health					X											X			spinoff	X											P
	Applied Materials			X																	X											
SP	Noble Corp			X										X							X											

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* Name Change Philip Morris to Altria Group

* Medco Health - spinoff from Merck

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Gross

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	Apache Corp			X										X								X										P
SP	Conocophillips			X										X								X										P
SP	Deere & Co			X										X								X										P
SP	ENC Corp Mass			X										X							X											P
SP	Lexmark Int Grp. Inc			X										X							X											P
SP	Maxim Integrated Prod.			X										X								X										P
SP	Taiwan Semiconductor Mfg			X										X							X											P
SP	Texas Instruments			X										X								X										P
SP	United Technologies			X										X								X										P
SP	Veritas Software			X										X							X											P
SP	Boston Scientific Corp			X										X							X											P
SP	Lilly Eli & Co			X										X								X										P
SP	Unitedhealth Grp Inc			X										X								X										P
SP	Abercrombie & Fitch			X										X							X											P
SP	Lowe's Co.			X										X								X										P
SP	McDonald's Corp			X										X								X										P
SP	TJX Co.			X										X								X										
SP	Viacom-B			X										X								X										P
SP	Charter One			X										X								X										P
SP	Countrywide Fin. Corp			X										X								X										P
SP	Goldman Sachs			X										X								X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Gass

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP	Hartford Fin'l Serv	C	DIVIDENDS	II	P Spouse
SP	Lehman Bros Hldg	C	DIVIDENDS; Other Type of Income: (loss)	II	P
SP	MBNA Corp	C	DIVIDENDS	II	P
SP	Wells Fargo	C	DIVIDENDS	III	P
SP	Ingersoll-Rand	C	DIVIDENDS	II	P
SP	Inco LTD	C	DIVIDENDS	I	P
SP	Nokia Corp	C	DIVIDENDS	II	P
SP	Mellon Mid Cap Stk Fund	F	DIVIDENDS	I	P
SP	Mellon Sm. Cap Stk Fund	F	DIVIDENDS	I	P
SP	Mellon Int'l Fund	F	DIVIDENDS	IV	P
SP	Mellon Emerging Markets Fund	F	DIVIDENDS	III	P
SP	Allegheny Cnty PA - Bond	E	INTEREST	IV	
SP	Penn Manor Sch Dist PA - Bond	D	INTEREST	IV	
SP	Mellon Nat'l Interm. Muni Bond Fund	F	INTEREST	V	
SP	Mellon PA Interm. Muni Bond Fund	H	INTEREST	VII	
SP	Northeast Inv TR SH Int. Fund	E	DIVIDENDS	V	P
SP	Price T Rowe High Yield Fund	D	INTEREST	V	P
SP	Mellon Hedge Fund	E	DIVIDENDS	I	P
SP	Money Market Demand Acct (Prin. + Int.)	E	DIVIDENDS	I	
SP	Money Market Demand - Inc. Hldg	C	DIVIDENDS	II	

*A - Name Change MPAM Emerging Market Fund TO Mellon Emerging Markets FD

*B - Name change MPAM Intern Muni Bd Fund TO Mellon Ntl Inter Mun Bd Fund

*C - Name Change MPAM PA Inter Muni Bd Fund TO Mellon PA Inter Muni Bd Fund

*D - Net Sweeps DF Temp Inv. Holding Inc & Prin TO Money Market Demand - Prin + Inc Hdg

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Porter Goss

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Anheuser Busch	O												X			X						X									P, S
SP	I Shares TR S&P SmallCap	O																		loss	X												P S
SP	I Shares S&P Midcap	O																		loss	X												P S
SP	I Shares Msci Eafe In. Fd	O																		loss	X												P S
SP	U.S. Treasury Notes	O														X				(loss)			X										P, S
SP	Duke Energy	O												X						loss		X											S (loss)
SP	Lockhead Martin	O																		loss	X												S (loss)
SP	Omnicom	O												X			X					X											S
SP	CSX	O												X			X					X											S
SP	Danaher Corp	O												X			X						X									S
SP	Medtronic	O												X						(loss)		X											S
SP	King Pharmaceuticals	O																		(loss)	X												S
SP	Target	O												X			X					X											S
SP	H & R Block	O												X			X						X									S
SP	Kohls Corp	O																		(loss)	X												S
SP	Marsh & McLennon	O												X						(loss)		X											S
SP	Estee Lauder	O												X						(loss)		X											S
SP	UPS	O												X						(loss)		X											S
SP	First Data	O												X			X						X									S
SP	Federal Natl Mortgage	O												X						(loss)		X											S
SP	Royal Dutch Pete Co	O												X			X							X									S

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Name Porter Goss | Page 13 of 24

SCHEDULE IV — TRANSACTIONS

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
SP	Blackrock PA Muni MM Fund		X		several				X						
SP	Blackrock PA Muni MM Fund	X			several				X						
SP	Blackrock Investment Fund (stk & bond)	X			7/31			X							
SP	Blackrock Investment Fund (stk & bond)		X		Jan 14 oct 10 July 11 Sept 10			X							
JT	Federated Govt. Obligations Fund		X		1/31			X							
JT	Federated Govt. Obligations Fund	X			12/31				X						
JT	Federated FL Muni Trust Fund		X		7 + transaction dates				X						
JT	Federated FL Muni Trust Fund	X			8 transactions				X						
JT	Del Monte Food		X		3/31 5/19	X									
JT	JP Morgan Chase	X			2/13 5/19 8/31 9/12 11/5		X								
SP	Wachovia Corp 2nd New	X			6/4 9/12		X								
JT	Bed Bath & Beyond	X			3/31 9/12		X								
JT	Pfizer Inc	X			2/19 4/24 3/31 / 9/12		X								
	General Motors (spouse continues to hold)		X		3/26 5/31	X									
SP	Transocean Inc		X		5/8 5/19 5/9	X									
SP	Medco Health Solutions		X		8/28 9/4 11/5	X									

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Name Porter Goss | Page 14 of 24

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
JT	Wal-Mart	X			2/19 11/5 3/26	X									
SP	Amgen Inc	X			2/19 9/12	X									
JT	Dell Computer Corp (name change to Dell Inc.)	X			3/31 11/5	X									
JT	Johnson & Johnson	X			2/19 11/5 3/31	X									
JT	Verizon Communications	X			3/31 11/5	X									
JT	Kimberly Clark	X			3/31 11/5	X									
SP	Coca-Cola		X		1/21 12/16		X								
SP	Apache Corp	X			5/10 5/4 11/3 11/5	X									
SP	Conocophillips	X			10/16 11/5	X									
SP	Exelon Corp	X			2/19 11/5	X									
JT	Exxon Mobil Corp	X			2/19 11/5	X									
SP	Int'l Paper Co	X			2/19 11/5	X									
SP	Cisco Systems	X			2/19 11/5	X									
SP	Deere & Co.	X			2/19 11/5	X									
SP	EMC Corp. Mass	X			11/3 11/4 11/5	X									
JT	IBM	X			2/19 11/5	X									

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SCHEDULE IV — TRANSACTIONS

Name Porter Goss

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
SP	Lexmark	X			8/21 8/22 11/5	X									
SP	Maxim Integrated Prod	X			4/9 11/5	X									
SP	Microsoft Corp	X			2/19 11/5	X									
JT	Northrop Grumman Corp	X			2/19 11/5	X									
SP	Taiwan Semiconductor Mfg.	X			10/16 11/5	X									
SP	Texas Instruments	X			2/19 11/5	X									
SP	United Techologies	X			2/19 11/5	X									
SP	Veritas Software	X			11/13	X									
SP	Procter & Gamble	X			10/16 11/5	X									
SP	Anheuser Busch	X			2/19 11/5	X									
SP	Abbott Lab	X			12/24	X									
SP	Boston Scientific	X			3/26 11/5	X									
SP	Lilly Eli & Co	X			2/19 11/5	X									
SP	Unitedhealth Group	X			2/19 11/5	X									
SP	Abercrombie & Fitch	X			7/23 10/16 11/5	X									
JT	Comcast	X			3/26 4/9 4/10 4/24 11/5	X									

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SCHEDULE IV — TRANSACTIONS

Name Porter Gass

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SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
SP	Walt Disney Co	X			2/19 8/21 11/5	X									
SP	Home Depot	X			5/8 7/23 5/9 11/5	X									
SP	Lowe's Companies	X			2/19 11/5	X									
SP	McDonald's Corp	X			11/7	X									
SP	Viacom Inc	X			2/19 11/5	X									
SP	Bank of America	X			2/19 11/5	X									
SP	Charter One	X			2/5 2/19 8/6 11/5	X									
SP	Citigroup	X			2/19 11/5 4/9	X									
SP	Countrywide Financial	X			6/2 11/5	X									
SP	Goldman Sachs Goup	X			8/21 11/5 10/24	X									
SP	Wells Fargo	X			2/19 11/5	X									
SP	Lehman Brothers Holding	X			2/19 11/5	X									
SP	MBNA Corp	X			2/5 11/5 2/19	X									
SP	SBC Communications	X			2/19 11/5	X									
SP	Ingersoll-Rand Co	X			2/28 11/5 3/3	X									
SP	Inco Ltd	X			10/1 10/2 10/3 4/5	X									

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Name Porter Goss

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SP	*Example:* Mega Corporation Common Stock	X			10-12-02		X								
SP	Nokia Corp	X			4/9 8/5	X									
SP	Tyco Int'l	X			12/1	X									
SP	Vodafone Group	X			2/28 3/3 11/5	X									
SP	Mellon Mid Cap Stk Fund	X			2/12 11/3				X						
SP	Mellon Small Cap Stk Fund	X			2/12 10/31				X						
SP	Mellon Int'l Fund	X			2/12 10/31				X						
SP	*Mellon Emerging Markets Fund *(formerly MPAM Emerging Markets Fund)	X			10/31			X							
SP	IShares TR S&P Small Cap	X			1/2			X							
SP	IShares S&P Midcap	X			1/2				X						
SP	Ishares Msci Eafe Index Fd	X			1/2			X							
SP	Northeast Inv TR Sh Ben Int Fund	X			2/13		X								
SP	Price T Rowe High Yield Fund	X			4/28		X								
SP	Mellon Hedge Fund	X			2/3		X								
SP	U.S. Treasury Notes	X			5/29			X							

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Name Porter Goss | Page 18 of 24

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
SP	Travelers Property Casualty Corp	X			4/19 1/5	X									
SP	Travelers Property Casualty A		X		5/19 sale under $1,000 (loss)										
SP	Travelers Property Casualty Corp		X		5/19 sale under $1,000 (loss)										
SP	Stryker Corp	X			9/12	X									
SP	Merk & Co.	X			9/12	X									
	Applied Materials	X			3/31	X									
SP	Duke Energy		X		2/28 3/3 3/5	X									
SP	Int'l Paper Co		X		12/2	X									
JT	General Electric		X		1/5 12/16		X								
JT	IBM		X		10/16 11/13	X									
SP	Microsoft Corp		X		11/13	X									
SP	Lockhead Martin		X		3/3	X									
JT	Intel Corp		X		4/5	X									
SP	Omnicom Group		X		4/25 4/25	X									
SP	CSX		X		9/30 10/1	X									
SP	Danaher Corp		X		8/21	X									

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Name Porter Goss

SCHEDULE IV — TRANSACTIONS

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SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
SP	Medtronic		X		9/30 10/1 10/16	X									
SP	Pepsico		X		1/21 12/16		X								
SP	Kraft foods		X		2/19 10/16	X									
SP	Anheuser Busch		X		4/24 4/25 11/7	X									
JT	Johnson & Johnson		X		3/26	X									
SP	Merk & Co		X		1/21	X									
SP	Wyeth		X		1/21 12/16		X								
SP	King Pharmaceuticals		X		3/18 3/20	X									
SP	Target		X		5/9	X									
SP	H & R Block		X		6/3	X									
SP	Kohls Corp		X		7/23	X									
JT	Wal Mart		X		9/30 10/1	X									
SP	Marsh & McLennon Cos.		X		2/5	X									
SP	Estee Lauder		X		2/19	X									
SP	UPS		X		4/9	X									
SP	First Data		X		11/3 11/4	X									

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Name Porter Goss | Page 22 of 24

SCHEDULE IV — TRANSACTIONS

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SP	*Example:* Mega Corporation Common Stock	X			10-12-02		X								
SP	Federal Natl Mortgage Assn		X		8/21	X									
SP	Bank of America		X		9/30 10/1	X									
SP	Lehman Brothers Hldgs		X		5/7 5/8	X									
SP	Fifth Third Bancorp		X		2/5 2/6	X									
JT	Verizon		X		10/16 12/29	X									
	Carnival Corp			X	4/7		Non-Cash Exchange								
SP	Royal Dutch Pete Co.		X		10/16	X									
SP	US Treasury Notes		X		11/3			X							
SP	IShares Msci Eafe Index Fd		X		2/6			X							
SP	IShares S&P Midcap		X		2/6				X						
SP	IShares TR S&P Smallcap		X		2/6			X							
SP	Tyco Intl		X		5/19		X								
SP	Seattle Gen. Oblig.	Maturity			8/1				X						
	Agilent		X		3/31	X									
	Schering-Plough Co		X		3/31	X									
JT	Bristol Myers Squibb		X		3/31	X									

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Name Porter Goss | Page 21 of 24

SCHEDULE IV — TRANSACTIONS

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SP	*Example:* Mega Corporation Common Stock	X			10–12–02		X								
JT	Northrop Grumman Corp		X		3/31	X									
SP	Honeywell Int'l		X		8/4		X								
JT	Motorola		X		3/31	X									
	Hewlett-Packard		X		3/31	X									
JT	AT&T Corp		X		3/31	X									
SP	Millcreek PA Sewer Auth. (partial call)		X		5/1	X									
	AT&T Wireless		X		3/31	under $1,000									
	Household Int'l to HSBC Holdings			X	9/29	non Cash Exchange									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	None						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$280
None		

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	None						

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
(uncompensated) Member, Board of Governors	Capitol Hill Club, Washington DC
(uncompensated) Member, Board of Advisors	CIA Officers Memorial Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

2004 JUN 14 AM 10:46

(Office Use Only)

LEGISLATIVE RESOURCE CENTER
U.S. HOUSE OF REPRESENTATIVES
2004 JUN 14 AM 10: 46
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

A $200 penalty shall be assessed against anyone who files more than 30 days late.

N. Kay Granger
(Full Name)

715 Jones Street Fort Worth, TX 76107
(Mailing Address)

202.225.5071
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representative — State: TX, District: 12 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☑ No ☐
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐		**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app 4, § 104 and U.S.C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Kay Granger	June 10, 2004

1662

SCHEDULE I - EARNED INCOME

Name N. Kay Granger

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
G & R Insurance Agency, Inc. (formerly Kay Granger Insurance Agency, Inc.), Fort Worth, TX	Policy Renewal	$56,000
Health Care Services Corporation	Policy Renewal	$8,832

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name N. Kay Granger

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Summit Bank	$15,001 - $50,000	NONE	NONE	
G&R Insurance Agency, Fort Worth, TX	$500,001 - $1,000,000	DIVIDENDS	NONE	
Granger Real Estate Management, LLP, Fort Worth, TX	$1 - $1,000	NONE	NONE	
Granger Real Estate, LLP (property located at 4702, 4704, 4706, 4708 Washburn. 1612, 1616 Kenley. Fort Worth, TX)	$100,001 - $250,000	NONE	NONE	
Jones Street Investments, Inc., Fort Worth, TX	$500,001 - $1,000,000	NONE	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name N. Kay Granger

	Northwestern Mutual Retirement Fund	$50,001 - $100,000	DIVIDENDS	NONE	
	Davis New York Venture (retirement)	$1,001 - $15,000	NONE	NONE	
	Dreyfus Midcap Index Fund (retirement)	$1,001 - $15,000	NONE	NONE	
	Lord Abbett Development	$1,001 - $15,000	NONE	NONE	
	Managers International Equity Fund (retirement)	$1,001 - $15,000	NONE	NONE	
	Pimco Total Return Fund (retirement)	$1,001 - $15,000	NONE	NONE	
	Royce Total Return Fund (retirement)	$1,001 - $15,000	NONE	NONE	
	White Oak Growth Stock Fund (retirement)	$15,001 - $50,000	NONE	NONE	
	Hugoton Royalty Trust (retirement)	$1,001 - $15,000	NONE	NONE	
	UBS Retirement Money Fund (retirement) (formerly Paine Webber Retirement Account)	$15,001 - $50,000	NONE	NONE	
	ING International Value Fund (retirement) (formerly Pilgrim Funds)	$1,001 - $15,000	NONE	NONE	
	Oppenheimer Real Asset Fund (retirement)	$1,001 - $15,000	NONE	NONE	

SCHEDULE IV - TRANSACTIONS

Name N. Kay Granger

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Hugoton Royalty Trust (retirement)	P	9-17-03	$15,001 - $50,000
	Oppenheimer Real Asset Fund (retirement)	P	9-17-03	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name N. Kay Granger

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Summit Bank, Fort Worth, TX	business loan to Jones Street Investments, Inc.)	$250,001 - $500,000
	Bank One, Fort Worth, TX	mortgage loan on 4702, 4704, 4706, 4708 Washburn and 1612, 1616 Kenley, Fort Worth, TX	$100,001 - $250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name N. Kay Granger

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Radio Shack	Oct. 24-26	Fort Worth, TX --Vancouver, BC--Fort Worth, TX	N	N	N	N/A

SCHEDULE VIII - POSITIONS

Name N. Kay Granger

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member of the Advisory Council	"I Have a Dream" Foundation, Fort Worth, TX
CEO, Vice President, Secretary and Treasurer	G&R Insurance Agency, Inc., Fort Worth TX
Member of Board of Directors	Longhorn Council of Boy Scouts of America
Member of the Board of Trustees	Texas Wesleyan University
Member of the Development Council	Texas A&M University
Member of the Advisory Board	The Oakridge School, Arlington, TX
Member of the Board	AIDS Outreach Advisory Board, Fort Worth, TX
Member of the Board	Caring for Children Foundation of Texas
Member of the Board	Wednesday's Child Benefit Corportation
Memberof the Advisory Board	Open Arms
Member of the Public Policy Committee	United Way
Member of The Advisory Board	Schola Cantorum

SCHEDULE VIII - POSITIONS

Name N. Kay Granger

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member of the Board	Juvenile Diabetes Foundation of Tarrant County
Member of the Board	Horses and America's Youth (HAY)
Member of the Advisory Board	Girls Choir
Member of the Advisory Council	The Parenting Center
Membe of the Advisory Committee	Fort Worth Public Library Foundation
Member of the Advisory Board	Tarrant Area Food Bank
Member of the Advisory Board	Children's Education Fund
Member of the Advisory Board	Teenage Republicans of Texas
Honoary Congressional Steering Committee	Green Thumb, Inc, "National Prime Time Awards"
Member of the Honorary Committee	The Enterprise Foundation
Host Committee	Botanical Research Institute of Texas
Member of Planning Committee	Aviation Museum

SCHEDULE VIII - POSITIONS

Name N. Kay Granger

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member	Texas Women's Alliance
Emeritus Member	Women in Government Relations, Alexandria, VA
Member of the Advisory Council	Habitat for Humanity, Fort Worh area
Steering Committee	Downtown Fort Worth, Inc.
Member of the Advisory Board	National Cowgirl Hall of Fame and Museum, Fort Worth, TX
Member of the Steering Committee	Intermodal Transportation Committee, Fort Worth, TX
Member of Advisory Board	American University Women and Politics Institute

SCHEDULE IX - AGREEMENTS

Name N. Kay Granger

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2003	I continue to receive commissions from policies sold before my election to Congress and I am covered by the health plan from G&R Insurance Agency, Inc. (formerly Kay Granger Insurance Agency, Inc.), Fort Worth, TX	N/A

JOEL HEFLEY, COLORADO
CHAIRMAN

DOC HASTINGS, WASHINGTON
JUDY BIGGERT, ILLINOIS
KENNY C. HULSHOF, MISSOURI
STEVEN C. LATOURETTE, OHIO

JOHN E. VARGO,
CHIEF COUNSEL/STAFF DIRECTOR

PAUL M. LEWIS,
COUNSEL TO THE CHAIRMAN

COLLEEN McCARTY,
ASSISTANT TO THE RANKING
MINORITY MEMBER

ONE HUNDRED EIGHTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

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SUITE HT-2, THE CAPITOL
(202) 225-7103

May 6, 2004

The Honorable Porter J. Goss
U.S. House of Representatives
108 Cannon House Office Building
Washington, DC 20515

Dear Colleague:

This responds to your letter of May 6, 2004 requesting a 90-day extension of time for filing the Financial Disclosure Statement required by the Ethics in Government Act.

Based on the reasons expressed in your letter, the Committee hereby grants you an extension of the filing due date from May 15, 2004, until August 13, 2004. Title I of the Act authorizes the Committee to grant reasonable extensions of time for the filing of any Financial Disclosure Statement; however, the total of such extensions for one individual in a calendar year cannot exceed 90 days. Therefore, we cannot grant any further extension beyond August 13, 2004.

The Committee staff is available to answer any questions relating to financial disclosure.

Sincerely,

John E. Vargo
Chief Counsel

JEV:plj

Copy to: Legislative Resource Center

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 12 PM 1:50
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Samuel Bruce "Sam" Graves, Jr.
(Full Name)

110 S. 10th Street
(Mailing Address)

(202) 225-7041
Daytime Telephone:
[Terry J. Brady (816) 460-5635]

Tarkio, Missouri 64491

Filer Status	[X] Member of the U.S. House of Representatives — State: Missouri District: Sixth (6)	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 10, 2004

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Tarkio, Missouri R-1 School District	Teachers Salary of spouse, Lesley J. Graves	

For payments to charity in lieu of honoraria, use Schedule II.

Name Samuel B. "Sam" Graves, Jr.	Page 3 of 26

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2003	$500
None			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAIN; EXCEPTED TRUST; OTHER TYPE OF INCOME; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:* SP Mega Corp Stock; Simon & Schuster; 1st Bank of Paducah, KY accounts	Indefinite; E; L	X; X; Royalties	X; X; X	P
JT	Sam Graves Farms: Clark Township & Tarkio Township, Atchison County, MO	G	X	VI	
JT	Rydex Mutual Funds/OTC Index Fund	C	X	III	S
JT	Janus Mercury Fund	C	X	III	
JT	Janus Enterprise Fund	B	X	III	
JT	Janus Strategic Value Fund	C	X	III	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Samuel B. "Sam" Graves, Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Janus Global Technology Fund							X					X					
JT	Alamosa PCS Holdings (APCS		X					X					X					S
JT	Oracle Corporation		X					X					X					
JT	Cisco Systems	X						X					X					
JT	E-Trade Checking Account			X					X				X					
JT	Golden Triangle Energy Cooperative		X										X					
JT	Small Town Investment Club		X					X										P, S *
JT	Farm Equipment & Machinery			X														S
JT	Firstar Bank 2 Checking Accounts			X					X				X					
JT	State of Missouri Retirement System	X						X				X						
JT	EMC Corporation		X									X						
	Thrift Savings Plan Federal Government		X									X						E
JT	Home Depot		X					X				X						P

This page may be copied if more space is required.

* See Attachments

SCHEDULE III (Cont.)

Attachment 3

Small Town Investment Club

Interest of Samuel B. "Sam" Graves, Jr., in Small Town Investment Club **10%**

1. Ameritrade Brokerage Statement for year ending December 31, 2003
2. Department of Treasury Schedule K-1 for Small Town Investment Club
3. Schedule of investments sold and the dates thereof for Small Town Investment Club
4. Detail for individual investments sold and price
5. Schedule of investments purchased and dates thereof for Small Town Investment Club
6. Detail for individual investments purchased and price for Small Town Investment Club

Sam has 10% ownership

AMERITRADE

DIVISION OF AMERITRADE INC
P O BOX 2209
OMAHA NE, 68103-2209
800-669-3900

SIPC

Account No.	Your Representative	Statement Period
162 - 879274	BB	11/29/2003-12/31/2003

SMALL TOWN INVESTMENT CLUB
PRTNRSHP
ATTN: BRENT HRABIK
PARTNERSHIP
1405 LINCOLN ST
EMPORIA, KS 66801

SPECIAL OFFER FOR AMERITRADE CLIENTS - SUBSCRIBE TO GAINSKEEPER AND GET A 30-DAY FREE TRIAL. THEN, YOU'LL ENJOY A 20% DISCOUNT OFF THE REGULAR SUBSCRIPTION RATE! GO TO WWW.GAINSKEEPER.COM/AMTD/MAIN.HTM

Account Summary As Of 12/31/2003

Client Accounts Protected Up To $25,000,000

Portfolio Summary

	Current Month Value	% of Long Value
Stocks	$44,394	100.0
*Long Market Value	$44,394	100.0
Cash Account (1) Balance	$98	
*Net Account Value	$44,492	
*Total Equity	$44,492	

*Excludes unpriced securities(NP)

Money Balance Summary

Account Type	Opening Balance	Closing Balance
Cash Account (1)	$268.21	$98.47
Net Cash Balance	$268.21	$98.47
Total Money Balance	$268.21	$98.47

Income Summary

Description	Current	Year to Date
Ordinary Dividends	$21.77	$376.48
Interest Income Credit Balance	.00	0.34
Long Term Capital Gains	.00	35.00

Security Positions

Acct Type	Quantity	Description	Ticker Symbol	Market Price	Market Value
1	50	AMERICAN HOME MORTGAGE HLDS COM	AHH	$22.51	$1,126
1	40	APPLE COMPUTER INC COM	AAPL	21.37	855
1	1000	E PRIME AEROSPACE CORP N/C 10-87 WAS BANGOR INVTS COR	EPEA	0.013	13
1	30	ENGINEERED SUPPORT SYS INC COM	EASI	55.06	1,652
1	100	GENERAL ELECTRIC CO COM	GE	30.98	3,098
1	100	HARLEY DAVIDSON INC COM	HDI	47.53	4,753

Name Samuel B. "Sam" Graves, Jr. Page 2 of 26

1	200	LEVEL 3 COMMUNICATIONS INC COM	LVLT	5.70	1,140
1	50	LOWES COS INC COM	LOW	55.39	2,770
1	100	MICROSOFT CORP COM	MSFT	27.37	2,737
1	75	PFIZER INC COM	PFE	35.33	2,650
1	100	PLUM CREEK TIMBER CO INC COM	PCL	30.45	3,045
1	10	RYLAND GROUP INC COM	RYL	88.64	886
1	31	SPDR TR UNIT SER 1	SPY	111.28	3,450
1	20	HENRY SCHEIN CORP COM	HSIC	67.58	1,352
1	50	SOUTHWEST AIRLINES CO COM	LUV	16.14	807
1	47	UNITED PARCEL SERVICE CL B	UPS	74.55	3,504
1	65	WAL-MART STORES COM	WMT	53.05	3,448
1	50	WASHINGTON MUTUAL COM	WM	40.12	2,006
1	1	WORLDCOM INC MCI GROUP COM	MCWEQ	0.049	0
1	100	YANKEE CANDLE CO COM	YCC	27.33	2,733
1	28	EVEREST REINSURANCE HLDGS INC COM	RE	84.60	2,369
Total Account Value					**$44,394**

Account Activity

Trade Date	Settle Date	Description	Quantity	Price /Rate	Debit	Credit
		OPENING BAL CASH ACCOUNT				**$268.21**
12/04/2003	12/04/2003	DELIVERED AMERICAN HOME MTG HOLDINGS 1:1 EXCH 12/4/03 02660R107 REORG - 1 1 EXCHANGE 12/4/03 TO AMERICAN HOME MORTGAGE HLDS	50			
12/04/2003	12/04/2003	RECEIVED AMERICAN HOME MORTGAGE HLDS COM REORG - 1:1 EXCHANGE 12/4/03 TO AMERICAN HOME MORTGAGE HLDS	50			
12/04/2003	12/04/2003	DIV/INT PFIZER INC COM Payable: 12/04/2003 Ordinary Dividends 11.25				11.25
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				200.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D CASH RECEIPT				100.00
12/04/2003	12/04/2003	CASH REC'D LAW OFFICE OF ZEL FISCHER				100.00
12/04/2003	12/04/2003					

Name Samuel B. "Sam" Graves, Jr.

Page 8 of 26

6521

SCHEDULE K-1 (Form 1065) Department of the Treasury Internal Revenue Service

Partner's Share of Income, Credits, Deductions, etc.

▶ See separate instructions.

For calendar year 2003 or tax year beginning , 2003, and ending , 20

OMB No. 1545-0099

2003

Partner's identifying number ▶ 486-78-2780

FOR OFFICIAL USE ONLY

Partner's name, address, and ZIP code

SAMUEL BRUCE GRAVES
110 S 10TH
TARKIO MO 64491

Partnership's identifying number ▶ 43-1838546

Partnership's name, address, and ZIP code

SMALL TOWN INVESTMENT CLUB
25147 190TH STREET
TARKIO MO 64491

A This partner is a [X] general partner [ ] limited partner [ ] limited liability company member

B What type of entity is this partner? ▶ INDIVIDUAL

C Is this partner a [X] domestic or a [ ] foreign partner?

D Enter partner's percentage of:

	(i) Before change or termination	(ii) End of year
Profit sharing	10.00%	10.00%
Loss sharing	10.00%	10.00%
Ownership of capital	10.00%	10.00%

E IRS Center where partnership filed return: OGDEN

F Partner's share of liabilities (see instructions):
Nonrecourse $
Qualified nonrecourse financing $
Other $

G Tax shelter registration number ▶

H Check here if this partnership is a publicly traded partnership as defined in section 469(k)(2) [ ]

I Check applicable boxes: (1) [ ] Final K-1 (2) [ ] Amended K-1

J Analysis of partner's capital account:

(a) Capital account at beginning of year	(b) Capital contributed during year	(c) Partner's share of lines 3, 4, and 7, Form 1065, Schedule M-2	(d) Withdrawals and distributions	(e) Capital account at end of year (combine columns (a) through (d))
			( )	

		(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) only
Income (Loss)	1	Ordinary income (loss) from trade or business activities	1		See page 5 of Partner's Instructions for Schedule K-1 (Form 1065).
	2	Net income (loss) from rental real estate activities	2		
	3	Net income (loss) from other rental activities	3		
	4	Portfolio income (loss):			
	a	Interest income	4a		Form 1040, line 8a
	b	(1) Qualified dividends	4b(1)	29	Form 1040, line 9b
		(2) Total ordinary dividends	4b(2)	29	Form 1040, line 9a
	c	Royalty income	4c		Sch. E, Part I, line 4
	d	(1) Net short-term capital gain (loss) (post-May 5, 2003)	4d(1)	17	Sch. D, line 5, col. (g)
		(2) Net short term capital gain (loss) (entire year)	4d(2)	(45)	Sch. D, line 5, col. (f)
	e	(1) Net long-term capital gain (loss) (post-May 5, 2003)	4e(1)	92	Sch. D, line 12, col. (g)
		(2) Net long-term capital gain (loss) (entire year)	4e(2)	102	Sch. D, line 12, col. (f)
	f	Other portfolio income (loss) (attach schedule)	4f		See pages 6 and 7 of Partner's Instructions for Schedule K-1 (Form 1065).
	5	Guaranteed payments to partner	5		
	6 a	Net section 1231 gain (loss) (post-May 5, 2003)	6a		
	b	Net section 1231 gain (loss) (entire year)	6b		
	7	Other income (loss) (attach schedule)	7		
Deductions	8	Charitable contributions (see instructions) (attach schedule)	8		Sch. A, line 16 or 18
	9	Section 179 expense deduction	9		See page 8 of Partner's Instructions for Schedule K-1 (Form 1065).
	10	Deductions related to portfolio income (attach schedule)	10		
	11	Other deductions (attach schedule)	11	10	

Name Samuel B. "Sam" Graves, Jr. Page 9 of 26

(5)

SMALL TOWN INVESTMENT CLUB 43-1838546 6522

Schedule K-1 (Form 1065) 2003 Page 2

	(a) Distributive share item		(b) Amount	(c) 1040 filers enter the amount in column (b) on:
Credits	12 a Low-income housing credit:			
	(1) From section 42(j)(5) partnerships	12a(1)		Form 8586, line 5
	(2) Other than on line 12a(1)	12a(2)		
	b Qualified rehabilitation expenditures related to rental real estate activities	12b		See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	c Credits (other than credits shown on lines 12a and 12b) related to rental real estate activities	12c		
	d Credits related to other rental activities	12d		
	13 Other credits	13		
Investment Interest	14 a Interest expense on investment debts	14a		Form 4952, line 1
	b (1) Investment income included on lines 4a, 4b(2), 4c, and 4f	14b(1)	29	See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	(2) Investment expenses included on line 10	14b(2)		
Self-Employment	15 a Net earnings (loss) from self-employment	15a		Sch. SE, Section A or B
	b Gross farming or fishing income	15b		See page 9 of Partner's Instructions for Schedule K-1 (Form 1065).
	c Gross nonfarm income	15c		
Adjustments and Tax Preference Items	16 a Depreciation adjustment on property placed in service after 1986	16a		See pages 9 and 10 of Partner's Instructions for Schedule K-1 (Form 1065) and Instructions for Form 6251.
	b Adjusted gain or loss	16b		
	c Depletion (other than oil and gas)	16c		
	d (1) Gross income from oil, gas, and geothermal properties	16d(1)		
	(2) Deductions allocable to oil, gas, and geothermal properties	16d(2)		
	e Other adjustments and tax preference items (attach schedule)	16e		
Foreign Taxes	17 a Name of foreign country or U.S. possession ▶			
	b Gross income from all sources	17b		Form 1116, Part I
	c Gross income sourced at partner level	17c		
	d Foreign gross income sourced at partnership level:			
	(1) Passive	17d(1)		
	(2) Listed categories (attach schedule)	17d(2)		
	(3) General limitation	17d(3)		
	e Deductions allocated and apportioned at partner level:			
	(1) Interest expense	17e(1)		
	(2) Other	17e(2)		
	f Deductions allocated and apportioned at partnership level to foreign source income:			
	(1) Passive	17f(1)		
	(2) Listed categories (attach schedule)	17f(2)		
	(3) General limitation	17f(3)		
	g Total foreign taxes (check one): ▶ ☐ Paid ☐ Accrued	17g		Form 1116, Part II
	h Reduction in taxes available for credit (attach schedule)	17h		Form 1116, line 12
Other	18 Section 59(e)(2) expenditures: a Type ▶			See page 10 of Partner's Instructions for Schedule K-1 (Form 1065).
	b Amount	18b		
	19 Tax-exempt interest income	19		Form 1040, line 8b
	20 Other tax-exempt income	20		See page 10 of Partner's Instructions for Schedule K-1 (Form 1065).
	21 Nondeductible expenses	21		
	22 Distributions of money (cash and marketable securities)	22		
	23 Distributions of property other than money	23		
	24 Recapture of low-income housing credit:			
	a From section 42(j)(5) partnerships	24a		Form 8611, line 8
	b Other than on line 24a	24b		
Supplemental Information	25 Supplemental information required to be reported separately to each partner (attach additional schedules if more space is needed):			

Name Samuel B. "Sam" Graves, Jr. Page 10 of 26

SCHEDULE IV — TRANSACTIONS

Name Samuel B. "Sam" Graves, Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock			X	10-12-03		X								
	See Attachments 1 and 2, Schedule K-1, Schedule of equities owned and disposed of and capital gains or losses relating thereto and Ameritrade Brokerage Statement for December 31, 2003, for Small Town Investment Club	X	X			X									
JT	Alamosa PCS Holdings (APCS)		X		12-31-03	X									
JT	Farm Equipment (i.e, planter)		X		2-18-03	X									
	American Century Ultra Mutual Fund (Deferred Compensation Plan) exchanged to Thrift Savings Plan (Federal Government)*			X	2-03	X									
JT	Atmel Corporation		X		8-22-03	X									
JT	Home Depot				8-27-03	X									
	* Rolled over into Thrift Savings Plan														

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H1 $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Farmers State Bank, Tarkio, Missouri	Mortgage on Farm 1 (115 acre		X								
	Farmers State Bank, Tarkio, Missouri	Mortgage on Farm 2 (240 acre			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
Stanley Herzog/Herzog LLC	Round trip air transportation from Kansas City to Florida and return to attend the Busch Grand National (NASCAR) Race with group of friends. Mr. Herzog offered to and did fly a group of friends including myself and Mr. Herzog to this sporting event in a plane owned by his limited liability company. (Determination on personal friendship received from Committee on Standards.)	$1,004.90

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	Federal Aviation Administration Managers Association 23rd Annual Convention	October 26-27	Kansas City, MO to Las Vegas, NV; Las Vegas, NV to Kansas City, MO	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Owner	Sam Graves Farms
Member	Small Town Investment Club (See Attachments 1, 2 and 3)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2000	State of Missouri, Deferred Compensation Plan	Optional deferred compensation plan whereby State of Missouri matches individual contribution of $25 or less (Investment in American Century Ultra Mutual Fund) (Rolled over or exchanged into Thrift Savings Plan)
2000	State of Missouri Employment Retirement System	State of Missouri Employee Retirement Program as a member of the Missouri General Assembly

Use additional sheets if more space is required.

Real Time Market Diary DJ30 10,140.48 -100.77 -0.98% NASDAQ 1,927.91 -9.82 -0.50% S&P 500 1,101.57 -12.41 -1.11% US markets close in

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Watch List

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Custom

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Some stocks to add to your Watch List? Enter them here : Add

your Watch List : (1-20 of 36) sorted by **Added** in **descending** order

Symbol	Last	Change	%Change	Volume	Vol %Change	Added	How	%Chan
AHH	22.83	-1.78	-7.23%	571,100	-4.71%	04/22/04	Position Closed	-4.2
EASI	47.77	-1.05	-2.15%	159,214	98.66%	03/06/04	Position Closed	-11.4
WM	38.51	-1.29	-3.24%	4,276,200	-31.20%	03/06/04	Position Closed	-14.5
MSFT	25.99	-0.13	-0.50%	56,678,097	63.33%	01/15/04	Position Closed	-5.4
LUV	14.03	-0.24	-1.68%	1,796,000	44.89%	01/15/04	Position Closed	-8.9
YCC	27.24	-0.14	-0.51%	161,700	-9.56%	01/03/04	Position Closed	0.0
HDI	55.02	-1.60	-2.83%	1,288,000	-15.70%	01/03/04	Position Closed	16.5
LF	20.79	-0.64	-2.99%	268,100	-31.59%	04/04/03	Position Closed	-13.2
MO	55.59	-0.76	-1.35%	3,735,400	-43.54%	04/04/03	Position Closed	96.4
LLL	61.31	-0.44	-0.71%	429,700	16.82%	03/13/03	Position Closed	62.6
CBUK	10.19	-0.36	-3.41%	12,700	-75.54%	12/07/02	Position Closed	126.4
ERICY	27.35	-0.80	-2.84%	2,129,921	-4.20%	12/07/02	Position Closed	188.2
MDR	8.50	-0.24	-2.75%	352,700	57.87%	12/07/02	Position Closed	184.2
ADCT	2.28	-0.03	-1.30%	5,573,399	-47.27%	12/07/02	Position Closed	19.3
NT	3.91	-0.04	-1.01%	22,651,400	5.10%	12/07/02	Position Closed	106.8
WCOEQ	0.010	0.000	0.00%	0	-100.00%	12/07/02	Position Closed	-95.6
MRK	48.03	-0.08	-0.17%	5,728,400	-4.34%	08/03/02	Position Closed	0.3
NSM	41.57	0.35	0.85%	4,595,000	63.77%	08/03/02	Position Closed	146.2
AVNX	2.79	-0.12	-4.12%	659,100	-39.38%	08/03/02	Position Closed	16.2
LVLT	2.98	-0.04	-1.32%	4,150,508	91.73%	12/13/01	Position Closed	-53.5

Delete checked stocks from your W

Graphs: One by One | Graphs: in Bulk | Next Page (21-36)

Community Message Preview for stocks on your Watch List

Symbol Start of Message Source

Name Samuel B. "Sam" Graves, Jr. Page 15 of 26

Real Time Market Diary DJ30 10,117.41 -123.84 -1.20% NASDAQ 1,917.95 -19.78 -1.02% S&P 500 1,098.68 -15.30 -1.37% US markets closed

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LeapFrog Enterprises Inc. (NYSE: LF)

Sector: Consumer Cyclical Industry: Recreational Products (1 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
LF	20.77	3:30PM	-0.66	-3.08%	21.61	20.70	279,400	-31.59%	24 Lon

Long closed positions in 'Small Town Invest' (0- 0 of 0) sorted by **Close Date**

Position	Bought	Price	Cost	Sold	Price	Value	Net	%Change	Con
20.00	01/13/03	26.00	530.99	04/04/03	23.99	468.81	-62.18	-11.71%	

Total -62.18

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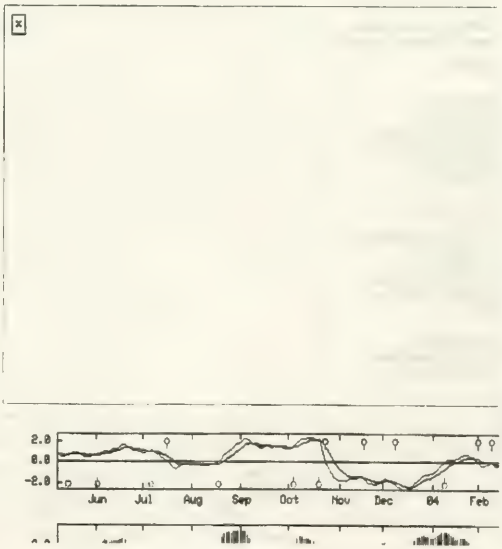
Technicals
Last Price Quote is:
-4.38%below 13-day EMA
-8.16%below 50-day EMA
Daily Price History
RS Rating: 15

Fundamentals
Key Data.
Market Cap (M): $1,272.94
P/E Ratio: 21.87
PEG Ratio: 1.19355
Next Earnings: 07/21/2004
Last Analyst Rating: Market Perform
More

Community
Member Recommendations
24 Long / 1 Short



Name Samuel B. "Sam" Graves, Jr. Page 16 of 26

Real Time Market Diary DJ30 10,117.41 -123.84 -1.20% NASDAQ 1,917.95 -19.78 -1.02% S&P 500 1,098.68 -15.30 -1.37% US markets closed

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Philip Morris Cos (NYSE: MO)

Sector: Consumer / Non-Cyclical Industry: Tobacco (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
MO	55.52	3:29PM	-0.83	-1.47%	56.35	55.32	3,995,700	-43.54%	143 Lon

Long closed positions in 'Small Town Invest' (0- 0 of 0) sorted by **Close Date**

Position	Bought	Price	Cost	Sold	Price	Value	Net	%Change	Con
20.00	02/07/03	37.75	766.00	04/04/03	29.00	569.01	-196.99	-25.72%	
						Total	-196.99		

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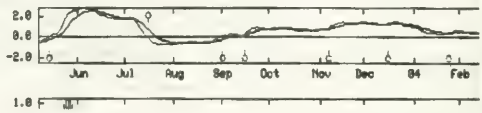
Technicals
Last Price Quote is:
-0.68%below 13-day EMA
0.21%above 50-day EMA
Daily Price History
RS Rating: 65

Fundamentals
Key Data:
Market Cap (M): $115,330.42
P/E Ratio 12.49
PEG Ratio 1.35714
Next Earnings: 07/08/2004
Last Analyst Rating: Neutral
More...

Community
Member Recommendations
143 Long / 39 Short



Name Samuel B. "Sam" Graves, Jr. Page 17 of 26

Real Time Market Diary DJ30 10,117.41 -123.84 -1.20% NASDAQ 1,917.96 -19.78 -1.02% S&P 500 1,098.88 -15.30 -1.37%US markets closed

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L-3 Communications Hldgs (NYSE: LLL)

Sector: Technology Industry: Communications Equipment (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
LLL	61.20	3:31PM	-0.55	-0.89%	61.85	61.09	453,700	16.82%	32 Lon

Long closed positions in 'Small Town Invest' (0- 0 of 0) sorted by Close Date

Position	Bought	Price	Cost	Sold	Price	Value	Net	%Change	Cor
20.00	09/06/02	53.11	1,070.20	03/07/03	35.80	705.01	-365.19	-34.12%	
						Total	-365.19		

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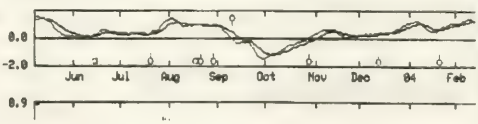
Technicals
Last Price Quote is:
-0.69%below 13-day EMA
4.02%above 50-day EMA
Daily Price History
RS Rating: 85

Fundamentals
Key Data:
Market Cap (M): $6,504.88
P/E Ratio: 21.49
PEG Ratio: 1.22819
Next Earnings: 07/21/2004
Last Analyst Rating: Underweight
More...

Community
Member Recommendations
32 Long / 2 Short



Name Samuel B. "Sam" Graves, Jr. Page 18 of 26

Real Time Market Diary DJ30 10,117.33 -123.91 -1.21% NASDAQ 1,917.95 -19.78 -1 02% S&P 500 1,098.88 -15.30 -1.37%US markets closed

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Portfolio

Enter New Positions | Graphs: One by One | Graphs: In Bulk | Trade | Return to Portfolios for Tarkio

Long positions in 'Small Town Invest' sorted by **Bought** in **descending** order

Symbol	Last	Change	%Change	Volume	Position	Bought	Value	Net	%Change	%To
AH	33.86	-0.56	-1.62%	164,400.	100	04/02/2004	3,387.00	-178.98	-5.01%	8
DNA	120.12	-2.01	-1.65%	1,711,900.	25	04/02/2004	3,003.00	237.01	8.56%	7
BKS	28.60	-0.55	-1.92%	391,500.	30	03/05/2004	858.00	-195.19	-18.53%	2
AMHC	23.82	-0.55	-2.26%	218,329.	20	02/12/2004	476.39	-135.49	-22.14%	1
SPY	110.55	-1.25	-1.12%	52,673,800.	43	01/08/2004	4,753.64	112.06	2.41%	11
GRMN	29.46	-0.08	-0.27%	984,815.	37	01/08/2004	1,090.39	-1,032.19	-48.62%	2
RE	81.97	-1.80	-2.16%	267,200.	28	09/11/2003	2,295.15	249.68	12.20%	5
PFE	36.45	-0.09	-0.27%	11,489,600.	75	07/07/2003	2,733.75	123.07	4.71%	6
RYL	74.26	-4.13	-5.28%	1,127,900.	10	06/17/2003	742.59	-48.39	-6.11%	1
HSIC	69.48	-0.19	-0.28%	501,139.	20	04/04/2003	1,389.64	527.65	61.21%	3
YCC	27.19	-0.18	-0.69%	178,300.	50	04/04/2003	1,359.50	440.53	47.93%	3
AAPL	26.85	0.23	0.86%	7,027,815.	40	02/07/2003	1,074.00	481.00	81.11%	2
GE	30.09	-0.37	-1.24%	17,088,700.	100	01/03/2003	3,009.00	472.01	18.60%	7
LOW	50.25	-1.25	-2.42%	5,932,700.	50	10/04/2002	2,512.50	411.50	19.58%	6
UPS	69.65	-0.69	-0.99%	1,752,900.	47	09/12/2002	3,273.55	579.18	21.49%	7
PCL	29.12	-1.04	-3.44%	613,800.	100	07/12/2002	2,913.00	36.25	1.26%	6
MCIT	1.00	0.99	1.00%	0.	1	03/07/2002	8.84	0.00	0.00%	0
LVLT	2.96	-0.06	-1.98%	4,656,677.	200	01/08/2002	592.00	-486.00	-45.08%	1
HDI	55.09	-1.52	-2.68%	1,425,500.	50	09/18/2001	2,755.00	557.85	25.39%	6
EPEA	0.01	0.00	0.00%	14,750.	1000	06/08/2001	10.00	-115.94	-92.06%	0
EASI	47.70	-1.11	-2.27%	178,872.	3.62396e-05	10/06/2000	0.00	0.00	764.49%	0
WMT	53.73	-0.85	-1.55%	12,208,100.	65	02/09/2000	3,492.44	-149.67	-4.10%	8
						Total	41,729.42	1,885.94	4.73%	

Delete checked stocks from your Po

Look-up closed positions in a stock: Go

Name Samuel B. "Sam" Graves, Jr. Page 19 of 26

Real Time Market Diary DJ30 10,120.59 -120.66 -1.17% NASDAQ 1,921.27 -16.46 -0.84% S&P 500 1,099.23 -14.75 -1.32%US markets close i

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Everest Re Grp Bermuda Hldg Co (NYSE: RE)

Sector: Financial Industry: Insurance (Prop. & Casualty) (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
RE	81.86	3:24PM	-1.92	-2.29%	83.48	81.60	247,400	21.65%	2 Long

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	Co
RE	28.0000	09/11/2003	72.66	2,292.08	2,045.47	246.61	12.06%	
			Total	2,292.08	2,045.47	246.61	12.06%	

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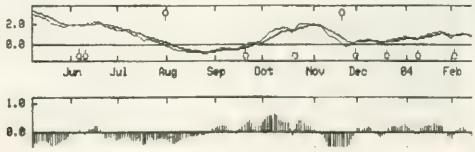
Technicals
Last Price Quote is:
-3.96%below 13-day EMA
-4.56%below 50-day EMA
Daily Price History
RS Rating: 45

Fundamentals
Key Data:
Market Cap (M): $4,841.41
P/E Ratio: 10.31
PEG Ratio: 0.46988
Next Earnings: 07/19/2004
Last Analyst Rating: In-line
More

Community
Member Recommendations
2 Long / 1 Short



Name Samuel B. "Sam" Graves, Jr. Page 20 of 26

Real Time Market Diary DJ30 10,117.48 -123.77 -1.20% NASDAQ 1,920.16 -17.57 -0.90% S&P 500 1,098.88 -15.10 -1.35% US markets closed

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Pfizer, Inc (NYSE: PFE)

Sector: Healthcare Industry: Major Drugs (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
PFE	36.35	3:25PM	-0.20	-0.55%	36.75	36.32	11,218,600	-22.57%	273 Lon

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	C
PFE	8.0000	03/07/2002	40.20	290.80	329.60	-38.80	-11.77%	
PFE	30.0000	05/08/2003	32.08	1,090.50	976.40	114.10	11.69%	
PFE	11.0000	06/17/2003	35.30	399.85	399.29	0.56	0.14%	
PFE	26.0000	07/07/2003	34.40	945.10	905.39	39.71	4.39%	
			Total	2,726.25	2,610.68	115.57	4.43%	

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Technicals
Most Actives
Last Price Quote is:
0.07% above 13-day EMA
0.76% above 50-day EMA
Daily Price History
RS Rating: 53

Fundamentals
Key Data:
Market Cap (M): $278,695.94
P/E Ratio: 211.27
PEG Ratio: 1.3
Next Earnings: 07/16/2004
Last Analyst Rating: Outperform
More...

Community
Member Recommendations
273 Long / 11 Short

Name Samuel B. "Sam" Graves, Jr. Page 21 of 26

Real Time Market Diary DJ30 10,117.48 -123.77 -1.20% NASDAQ 1,920.16 -17.57 -0.90% S&P 500 1,098.88 -15.10 -1.35% US markets closed

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Ryland Group (NYSE: RYL)

Sector: Capital Goods Industry: Construction Services (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
RYL	74.21	3:25PM	-4.19	-5.34%	77.31	74.21	1,075,600	151.36%	21 Long

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	Co
RYL	10.0000	06/17/2003	78.00	742.10	790.99	-48.89	-6.18%	
			Total	742.10	790.99	-48.89	-6.18%	

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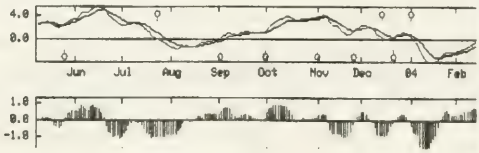
Technicals
Close Below the 13-day EMA
Price Lower
Last Price Quote is:
-6.69%below 13-day EMA
-9.21%below 50-day EMA
Daily Price History
RS Rating: 48

Fundamentals
Key Data:
Market Cap (M): $1,887.64
P/E Ratio: 8.02
PEG Ratio: 0.570312
Next Earnings: 07/20/2004
Last Analyst Rating: Strong Buy
More...

Community
Member Recommendations
21 Long / 15 Short



Name Samuel B. "Sam" Graves, Jr. Page 22 of 26

Real Time Market Diary DJ30 10,117.48 -123.77 -1.20% NASDAQ 1,920.16 -17.57 -0.90% S&P 500 1,096.88 -15.10 -1.35% US markets closed

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Schein (Henry) (NASDAQ: HSIC)

Sector: Healthcare Industry: Medical Equipment & Supplies (1 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
HSIC	69.50	3:41PM	-0.18	-0.26%	70.76	69.11	476,201	41.61%	12 Lon

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	Co
HSIC	20.0000	04/04/2003	42.55	1,390.00	861.99	528.01	61.25%	
			Total	1,390.00	861.99	528.01	61.25%	

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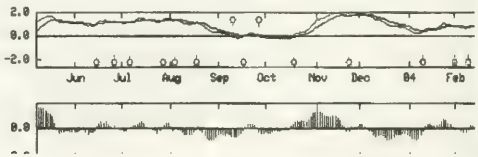
Technicals
Last Price Quote is:
-4.00% below 13-day EMA
-4.48% below 50-day EMA
Daily Price History
RS Rating: 56

Fundamentals
Key Data:
Market Cap (M): $3,062.48
P/E Ratio: 21.84
PEG Ratio: 1.3
Next Earnings: 08/10/2004
Last Analyst Rating: Neutral
More...

Community
Member Recommendations
12 Long / 2 Short



Name Samuel B. "Sam" Graves, Jr. Page 23 of 26

Real Time Market Diary DJ30 10,116.12 -125.12 -1.22% NASDAQ 1,919.39 -18.34 -0.94% S&P 500 1,096.73 -15.25 -1.36% US markets closed

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Yankee Candle Inc (NYSE: YCC)

Sector: Consumer / Non-Cyclical Industry: Personal & Household Prods. (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
YCC	27.07	3:25PM	-0.31	-1.13%	27.46	27.03	169,200	-9.56%	7 Long

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	Co
YCC	31.0000	09/18/2001	18.25	839.17	573.75	265.42	46.26%	
YCC	19.0000	04/04/2003	18.01	514.33	345.22	169.11	48.99%	
			Total	1,353.50	918.97	434.53	47.29%	

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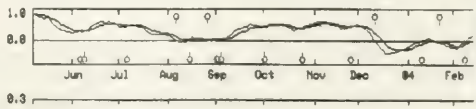
Technicals
Last Price Quote is.
0.30% above 13-day EMA
-0.73% below 50-day EMA
Daily Price History
RS Rating: 67

Fundamentals
Key Data:
Market Cap (M): $1,363.06
P/E Ratio: 18.6
PEG Ratio: N/A
Next Earnings: 07/20/2004
Last Analyst Rating: In-Line
More ...

Community
Member Recommendations
7 Long / 0 Short



Name Samuel B. "Sam" Graves, Jr. Page 24 of 26

Real Time Market Diary DJ30 10,116.12 -125.12 -1.22% NASDAQ 1,919.39 -18.34 -0.94% S&P 500 1,098.73 -15.25 -1.36% US markets closed

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Apple Computer Inc (NASDAQ: AAPL)

Sector: Technology Industry: Computer Hardware (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
AAPL	26.98	3:43PM	0.36	1.35%	27.57	26.55	6,929,642	-12.92%	236 Lon

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	Co
AAPL	40.0000	02/07/2003	14.55	1,079.20	593.00	486.20	81.99%	
			Total	1,079.20	593.00	486.20	81.99%	

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Technicals
Most Actives
Last Price Quote is:
0.72% above 13-day EMA
2.51% above 50-day EMA
Daily Price History
RS Rating: 91

Fundamentals
Key Data:
Market Cap (M): $9,910.62
P/E Ratio: 58.55
PEG Ratio: 3.31818
Next Earnings: 07/14/2004
Last Analyst Rating: Market Perform
More...

Community
Member Recommendations
236 Long / 25 Short

Name Samuel B. "Sam" Graves, Jr. Page 25 of 26

Real Time Market Diary DJ30 10,117.05 -124.20 -1.21% NASDAQ 1,918.05 -19.68 -1.01% S&P 500 1,098.65 -15.33 -1.37% US markets closed

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General Electric (NYSE: GE)

Sector: Conglomerates Industry: Conglomerates (0 new highs today)

Symbol	Last	Time	Change	%Change	High	Low	Volume	Vol %Change	Member Rec
GE	29.99	3:27PM	-0.48	-1.58%	30.65	30.00	16,465,600	-26.55%	411 Lon

Long positions in 'Small Town Invest' sorted by **Bought** in **ascending** order

Symbol	Position	Bought	Open Price	Value	Cost	Net	%Change	C
GE	100.0000	01/03/2003	25.26	2,999.00	2,536.99	462.01	18.21%	
			Total	2,999.00	2,536.99	462.01	18.21%	

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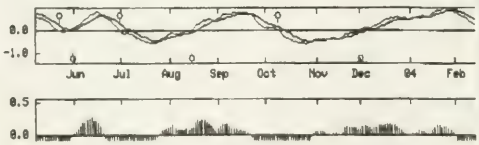
Technicals
Close Below the 13-day EMA
Most Actives
Last Price Quote is:
-1.58% below 13-day EMA
-3.00% below 50-day EMA
Daily Price History
RS Rating: 37

Fundamentals
Key Data:
Market Cap (M): $307,097.08
P/E Ratio: 19.70
PEG Ratio: 1.95876
Next Earnings: 07/09/2004
Last Analyst Rating: Buy
More...

Community
Member Recommendations
411 Long / 49 Short



Name: Samuel B. "Sam" Graves, Jr. Page 26 of 26

SAM GRAVES
6TH DISTRICT, MISSOURI

1513 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-7041

113 BLUE JAY DRIVE, SUITE 100
LIBERTY, MO 64068
(816) 792-3976

201 SOUTH 8TH STREET, ROOM 330
ST. JOSEPH, MO 64501
(816) 233-8818

Congress of the United States
House of Representatives
Washington, DC 20515–2506

May 21, 2004

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U.S. HOUSE OF REPRESENTATIVES

MC

The Honorable Joel Hefley
Chairman, Committee on Standards
of Official Conduct
Legislative Resource Center
B106 Cannon House Office Building
Washington, D.C. 20515-6612

Re: Amendment to Page 1 of Form A,
Financial Disclosure Statement for Calendar Year 2003

Dear Chairman Hefley:

Enclosed please find an original and two copies of an amended page 1 to Form A of my Personal Financial Disclosure Statement for Calendar Year 2003. The Amendment revises my response to question VII to the answer "Yes." The amendment is necessitated as a result of a typographical error when the answer "No" was inadvertenly checked.

Thank you very much for your consideration.

Very truly yours,

Sam

Sam Graves
Member of Congress

Enclosures

CC 1297491v1

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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(Office Use Only) U.S. HOUSE OF REPRESENTATIVES

Samuel Bruce "Sam" Graves. Jr.
(Full Name)

110 S. 10th Street
(Mailing Address)

(202) 225-7041
Daytime Telephone

Tarkio, Missouri 64491

[Terry J. Brady (816) 460-5635]

Filer Status	[X] Member of the U.S. House of Representatives	State: Missouri District: Sixth (6)	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 21, 2004

1701

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2004 MAY -6 AM 11:05

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

Raymond Eugene 'Gene' Green
(Full Name)

P O Box 16128 Houston, TX 77222-6128
(Mailing Address)

281-999-5879
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: TX, District: 29 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		

1702

SCHEDULE I - EARNED INCOME

Name Raymond Eugene 'Gene' Green

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Employees Retirement System	Legislative Pension	$42,195.12
Teacher Retirement System	Spouse Pension	N/A
Aldine Independent School District	Spouse Salary	N/A
Harris County Dept. Of Education	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raymond Eugene 'Gene' Green

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Bank of America	$50,001 - $100,000	INTEREST	$201 - $1,000	
JT	Chase Bank (IRA's)	$50,001 - $100,000	INTEREST	NA	
JT	Aldine Teachers' Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	
JT	Prudential Financial	$100,001 - $250,000	INTEREST & SPOUSE DEFERRED COMP	NA	
JT	Planters Bank (IRA's)	$50,001 - $100,000	INTEREST	NA	
JT	Prudential Financial	$1,001 - $15,000	INTEREST & DIVIDEND	$201 - $1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raymond Eugene 'Gene' Green

JT	20.049 Acres Rural Land, Montgomery County, TX	$15,001 - $50,000	Other: None	NONE	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Raymond Eugene 'Gene' Green

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
JFK School of Government/The Commonwealth Fund	Jan. 16-18	Houston-Aventura, FL	Y	Y	Y	N/A
Assn of American Railroads	Jan. 18-20	Aventura, FL-Houston	Y	Y	Y	N/A
Intl Management and Development Inst. (IMDI)	Feb. 17-21	Houston-Cologne & Bonn, Germany-Houston	Y	Y	Y	N/A
The Public Governance Institute	Feb. 28 - Mar. 2	Wash., DC - White Sulphur Springs, WV-Wash., DC	Y	Y	Y	N/A
Natl Assn of Broadcasters	Apr. 4-7	Houston-Las Vegas, NV-Houston	Y	Y	Y	N/A
Assn of American Railroads	Apr. 24-27	Houston-Pebble Beach, CA-Houston	Y	Y	Y	N/A
The Congressional Program of the Aspen Institute	May 26 - June 1	Houston-Rome, Italy, Houston	Y	Y	Y	N/A
Natl Cable and Telecom Assn	June 7-9	Houston-Chicago, IL-Wash., DC	Y	Y	Y	N/A
American Israel Education Foundation	Aug. 2-10	Houston-Israel-Houston	Y	Y	Y	N/A
University of Texas Pan American Foundation	Oct. 12-13	Houston-Brownsville-McAllen, TX-Houston	Y	Y	Y	N/A

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Raymond Eugene 'Gene' Green

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
The Congressional Program of the Aspen Institute	Dec. 4-7	Houston-Punta Mita, Mexico-Wash., DC	Y	Y	Y	N/A

SCHEDULE IX - AGREEMENTS

Name Raymond Eugene 'Gene' Green

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
05/90	International Typographical Union	Pension Upon Retirement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 2:57
(Office Use Only)

Mark Andrew Green
(Full Name)
4369 Touchstone Drive, Oneida, WI 54155
(Mailing Address)
920-437-1954
Daytime Telephone:

Filer Status	☒ Member of the U.S. House of Representatives — State: WI District: 8	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5/14/04

1709

Name M Green | Page 2 of 11

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name M Green | Page 3 of 11

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name M. Green

Page 4 of 11

BLOCK A

Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B

Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C

Type of Income

BLOCK D

Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E

Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B [illegible]	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L [illegible]	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II [illegible]	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VI [illegible]	VII $15,001 – $50,000	VIII [illegible]	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	P, S, E
Examples: SP	Mega Corp Stock					X								X																		P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X																
	LMG Property Management, a Wisconsin general partnership holding title to 3 rental properties. Green holds 1/3 interest																															
	1825-27 Frank St, Green Bay																															
	1790 7th St., " "																															
	408-410 Steven St, " "																															
	Scudder Investments: Managed Municipal Bonds Fund				X									X		X	X					X										S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name M Green

Page 5 of 11

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P, S, E)
		A None; C $1 – $1,000; E $1,001 – $15,000; G $50,001 – $100,000; I $250,001 – $500,000; K $1,000,001 – $5,000,000; L $25,000,001 – $50,000,000; M Over $50,000,000	DIVIDENDS; RENTS; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
	Flex Funds Money Mkt	C	DIVIDENDS; INTEREST	II	
	Scudder Investment Total Ret. IRA	E	INTEREST	II	
	Thrift Savings Plan	G			
	American Funds Group				
	Europacific Growth Fund	E	DIVIDENDS; CAPITAL GAINS	III	
	Growth Fund of America	G	DIVIDENDS; CAPITAL GAINS	II	
	Washington Mutual Fund	E	DIVIDENDS; CAPITAL GAINS	III	
	Putnam Inv. Variable Annuity	E		II	
	American Legacy Annuity	E		I	
	Mass. Investors Growth Stock (IRA)	C	DIVIDENDS; INTEREST	I	
	Gannet Stock	E	DIVIDENDS; INTEREST		
	General Electric	C	DIVIDENDS; INTEREST	I	
	Wis Retirement System	E	(last statement received for year 1998)		
	Putnam Growth + Income Fund	C	DIVIDENDS; INTEREST	II	
	Wis. Deferred Comp. Program				
	Vanguard Instit. Index	C	DIVIDENDS; INTEREST		
	Fidelity Contra Fund	E	DIVIDENDS; INTEREST		
	Janus Fund	E	DIVIDENDS; INTEREST		
	Coca Cola Stock	C	DIVIDENDS; INTEREST	I	
	Susan Green IRA Rollover				
	Washington Mutual Investors Fund	C			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name M. Green

BLOCK A Asset and/or Income Source (SP, DC, JT)	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction (P, S, E)
Robert W Baird																														
Rollover IRA consists of these funds:																														
MFS SER TR II Growth			X																											
MFS SER TR I Tech			X																											
MFS CAP OPPORTUNITIES			X																											
MASS. INV GROWTH STOCK			X																											
MASS. INVS TR			X																											
Total Value				X																										
VCSP/College America (529s)																														
Europacific Growth			X																											
Growth Fund of America			X																											
Fundamental Investors			X																											
M.I. State Mun Bond			X												X							X								P
Milwaukee Municipal Bond			X												X															P
Washoe County NV Munic. Bond			X												X							(Zero Coupon Bond)								P
Pacific Life			X																			X								
AIM			X																											P
Capital Guardian			X																											P
Janus			X																											P
Lazard			X																											P
Mercury Advisors			X																											P
Pimco			X																Retirement Tax Deferred											P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name M Green

Page 7 of 11

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	TRUST FUND INCOME	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Pacific Life Annuity (cont)																							
	Pacific Life		X																					P
	Salomon Brothers																							P

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SCHEDULE IV — TRANSACTIONS

Name Mark Green

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03		X								
JT	Scudder Managed Municipal Bond		X		1/29/03		X								
JT	MI St. Municipal Bond	X			2/13/03	X									
JT	Milwaukee, WI Municipal Bond	X			2/18/03	X									
JT	Washoe County, Nevada Munic. Bond	X			2/20/03	X									
JT	Pacific Life Annuity (existing life policy with Woodmen Accidental + Life terminated and proceeds used to purchase annuity)			X	4/21/03		X								

This page may be copied if more space is required.

Name M Green

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: [redacted]	C $15,001–$50,000	D [redacted]	E $100,001–$250,000	F [redacted]	G $500,001–$1,000,000	H [redacted]	I $5,000,001–$25,000,000	J [redacted]	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Associated Bank Green Bay	Mortgage on 3 rental properties for LMG Property Management				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

Name M Green

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	American Israel Education Fdn.	8/23-31/2003	Green Bay, WI — Israel — Green Bay	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	LMG Property Management, a Wisconsin general partnership

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

MARK GREEN
8TH DISTRICT, WISCONSIN

ASSISTANT MAJORITY WHIP

COMMITTEE ON
FINANCIAL SERVICES
VICE CHAIR
SUBCOMMITTEE ON HOUSING AND
COMMUNITY OPPORTUNITY

COMMITTEE ON THE JUDICIARY

COMMITTEE ON
INTERNATIONAL RELATIONS

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES

HAND DELIVERED

June 8, 2004

LEGISLATIVE RESOURCE CENTER
2004 JUN -9 PM 3:52
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC

(2)

Mr. Jeff Trandahl
Clerk of the House
U.S. House of Representatives
B-106 Cannon House Office Building
Washington, DC 20515

Dear Mr. Trandahl:

Please accept the enclosed revised "Schedule III" form, amending my calendar year 2003 Financial Disclosure in order to accurately reflect my interest held in LMG Property Management.

I inadvertently neglected to check the boxes for each "block" on the form. If you have any questions, please call me at 202-225-5665.

Thank you for your help.

Best regards,

Mark Green
Member of Congress

1314 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5665

700 EAST WALNUT STREET
GREEN BAY, WI 54301
(920) 437-1954

609A WEST COLLEGE AVENUE
APPLETON, WI 54911
(920) 380-0061

TOLL FREE IN WISCONSIN (800) 773-8579
www.house.gov/markgreen

PRINTED ON RECYCLED PAPER

HAND DELIVERED

Name M. Green

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each* asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as Income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Owner	Asset	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Transaction (P, S, or E)
SP	SP Mega Corp Stock					X								X										X								P
DC	Examples Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah KY accounts						X									X										X						
	LMG Property Management, a Wisconsin general partnership holding title to 3 rental properties. Green holds 1/3 interest																															
	1825-27 Frank St, Green Bay					X																										
	1790 7th St., " "					X																										
	408-410 Steven St, " "					X																										
	Scudder Investments: Managed Municipal Bonds Fund				X									X		X	X					X										

For additional assets and unearned income, use next page.

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U.S. HOUSE OF REPRESENTATIVES
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2004 MAY 17 PM 3:52

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 9
For use by Members, officers, and employees

James Charles Greenwood
(Full Name)

2436 Rayburn HOB Washington, DC 20515
(Mailing Address)

202/225-4276
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representative — State: PA, District: 8	☐ Officer Or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☑ No ☐	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions-	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James Greenwood	5-17-04

SCHEDULE I - EARNED INCOME

Name James Charles Greenwood

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
County of Bucks	Spouse Salary	n/a
Commonwealth of PA	pension for House and Senate service	$6,155

SCHEDULE II - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

Name James Charles Greenwood

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
American Society of Anesthesiologists	speech	5/13/03	$1,500
Philadelphia Orthopaedic Society	speech	12/15/03	$1,000
Bill and Melinda Gates Institute for Population and Reproductive Health	speech	12/17/03	$1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James Charles Greenwood

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	IRA Bonds -CATS	$1,001 - $15,000	INTEREST	NONE	
	IRA Bonds -Refco Strips	$15,001 - $50,000	INTEREST	NONE	
	IRA Evergreen Equity Index	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	IRA Evergreen Global Leaders	$1,001 - $15,000		NONE	
	IRA Evergreen Growth	$1,001 - $15,000		NONE	
	IRA Investment Company of America	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James Charles Greenwood

DC	College Bound Fund - should have been disclosed on previous statements beginning in 2001	$1,001 - $15,000		NONE	P
DC	College Bound Fund - should have been disclosed on previous statements beginning in 2001	$1,001 - $15,000		NONE	P

SCHEDULE IV - TRANSACTIONS

Name James Charles Greenwood

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	IRA Evergreen Growth and Income (came from Evergreen Capital Growth)	E	12/10/03	$1,001 - $15,000
	IRA Evergreen Capital Growth (exchanged for Evergreen Growth and Income)	E	12/10/03	$1,001 - $15,000
	IRA Evergreen Growth and Income	S	12/10/03	$1,001 - $15,000
	IRA Investment Company of America	P	12/11/03	$1,001 - $15,000
DC	College Bound Fund	P	Jan.-Dec./03	$1,001 - $15,000
DC	College Bound Fund	P	Jan.-Dec./03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name James Charles Greenwood

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
NASDAQ	3/28-30/03	Philadelphia-Miami-Philadelphia	Y	Y	Y	n/a
Water Utilities Executive Council	4/12-17/03	Washington,DC-Bermuda-Philadelphia	Y	Y	Y	n/a
Pinellas County Osteopathic Society	6/8-9/03	Santa Anna, CA-Las Vegas-Philadelphia	Y	Y	Y	n/a
American College of Surgeons Keystone Chapter	8/1-2/03	Doylestown,PA-Hershey, PA-Doylestown, PA	Y	N	N	n/a
Ripon Educational Fund	8/10-15/03	Philadelphia-Detroit-London-Detroit-Philadelphia	Y	Y	Y	n/a
Bill and Melinda Gates Institute for Population and Reproductive Health	12/3-4/03	Doylestown,PA-Baltimore,MD-Doylestown, PA	Y	Y	N	n/a
Philadelphia Orthopaedic Society	12/15-16/03	Langhorne,PA-Philadelphia-Doylestown, PA	Y	N	N	n/a

SCHEDULE VIII - POSITIONS

Name James Charles Greenwood

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director (unpaid)	Bucks County (PA) Council on Alcoholism and Drug Dependence
Director (unpaid)	The Woods School
President (unpaid)	Global Legislators Organization for a Balanced Environment (GLOBE International)
Member (unpaid)	YWCA Bucks County (PA) Advisory Council
Member (unpaid)	Bucks County (PA) Boy Scout Advisory Board
Member (unpaid)	Parents Television Council

SCHEDULE IX - AGREEMENTS

Name James Charles Greenwood

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
January 1987	PA State Senate	continuing participation in health benefit plan as result of PA State Senate service

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

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2004 MAY 17 PM 12: 25
(Office Use Only)
OFFICE OF HOUSE ETHICS
MC

Raul M. Grijalva
(Full Name)

408 West Ohio Street Tucson, AZ 85714
(Mailing Address)

202.225.2435
Daytime Telephone

Filer Status ☐ Member of the U.S House of Representatives — State: AZ District: 07 — ☑ Officer Or Employee — Employing Office: U.S. House of Representatives — Termination Date:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4 § 104 and U S C § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Raul M Grijalva	5/17/04

SCHEDULE I - EARNED INCOME

Name Raul M. Grijalva

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
City of Tucson	Spouse Salary	$43,583.71

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M Grijalva

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	3426 S. 9th Avenue Tucson, AZ	$50,001 - $100,000	Rent	$1,001 - $2,500	Other
SP	Alcoa, Inc	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P
SP	Alliance MNI Inc - AZ Port	$1 - $1,000	INTEREST	$1 - $200	S
SP	Alliance Premier Growth A	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
	Arizona State Retirement System	$1,001 - $15,000	INTEREST	$1 - $200	Other
SP	Fidelity ADV SER VII HC	$1,001 - $15,000	DIVIDENDS	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M. Grijalva

SP	Fidelity Advisor Health Care Fund Class A	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	First AM Prime Obligs FDA	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	First American Invt FD, Inc	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	First American Invt Fds Inc - Tech FD Retail Class A	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	Franklin Life Valuemark Annuities	$15,001 - $50,000	INTEREST	NONE	S
SP	Hartford Mutual Funds, Inc	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Hartford Small Company Fl Cl A	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	ING Invt FDS MAGNACAP A	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	ING Magna Cap Fund Class A	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	Munder FDS TR Framilington	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Munder Framlington Healthcare Fd Class A	$1,001 - $15,000	DIVIDENDS	NONE	P
	Public Safety Personnel Retirement System; Phoenix, AZ	$15,001 - $50,000	INTEREST	$1 - $200	
SP	Rowe T Price Small Cap	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Scudder Dreman Financial Services Fund Class A	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M. Grijalva

SP	Scudder Equity TR New FD	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Seligman Frontier FD CL	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	ST STR RESH Inc, Global	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Templeton Developing Market	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Tucson Supplemental Retirement System, Tucson, AZ	$50,001 - $100,000	Retirement Funds	$5,001 - $15,000	Other

SCHEDULE IV - TRANSACTIONS

Name Raul M. Grijalva

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Alcoa, Inc	P	12-23-03	$425
SP	Fidelity Advisor Health Care Fund Class A	P	10-27-03	-$135
SP	First American Invt Fds Inc - Tech FD Retail Class A	P	10-27-03	$400
SP	Hartford Small Company Fl Cl A	P	10-27-03	$325
SP	ING Magna Cap Fund Class A	P	10-27-03	-$800
SP	Munder Framlington Healthcare Fd Class A	P	10-27-03	$375
SP	Scudder Dreman Financial Services Fund Class A	P	10-27-03	$200

SCHEDULE V - LIABILITIES

Name Raul M. Grijalva

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	Washington Federal Savings; Tucson, AZ	Mortgage on 408 W. Ohio Street; Tucson, AZ	$15,001 - $50,000
JT	Tucson Old Pueblo Credit Union; Tucson, AZ	Car Loan	$10,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Raul M. Grijalva

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Brotherhood of Teamsters	Nov. 13-15	Washington, DC - El Paso, TX- Ciudad Juarez, Mex-Washington, DC	Y	Y	N	N/A
National Federation of the Blind	June 30-July 1	Tucson, AZ - Louisville, KY - Tucson, AZ	Y	N	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

(7)

HAND DELIVERED

2004 JUN 15 PM 1:59
(Office Use Only)

MC

Raul M. Grijalva
(Full Name)

408 West Ohio Street Tucson, AZ 85714
(Mailing Address)

202.225.2435
Daytime Telephone:

Filer Status: [ ] Member of the U.S. House of Representatives — State: AZ — District: 07 — [x] Officer Or Employee — Employing Office: U.S. House of Representatives

Report Type: [ ] Annual (May 15) — [x] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes [x] No [ ]
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes [ ] No [x]
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes [x] No [ ]
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes [x] No [ ]
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes [ ] No [x]
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes [ ] No [x]
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes [x] No [ ]
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes [ ] No [x]
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes [ ] No [x]
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [x]

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [x]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Raul M. Grijalva	June 15 - 2004

1739

SCHEDULE I - EARNED INCOME

Name Raul M. Grijalva

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
City of Tucson	Spouse Salary	$43,583.71

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M. Grijalva

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	3426 S. 9th Avenue Tucson, AZ	$50,001 - $100,000	Rent	$1,001 - $2,500	Other
SP	Alcoa, Inc	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	PS
SP	Alliance MNI Inc - AZ Port	$1 - $1,000	INTEREST	$1 - $200	S
SP	Alliance Premier Growth A	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
	Arizona State Retirement System	$1,001 - $15,000	INTEREST	$1 - $200	Other
SP	Fidelity ADV SER VII HC	$1,001 - $15,000	DIVIDENDS	NONE	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M Grijalva

SP	Fidelity Advisor Health Care Fund Class A	$1,001 - $15,000	DIVIDENDS	NONE	PS
SP	First AM Prime Obligs FDA	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
SP	First American Invt FD, Inc	$1,001 - $15,000	DIVIDENDS	NONE	PS
SP	First American Invt Fds Inc - Tech FD Retail Class A	$1,001 - $15,000	DIVIDENDS	NONE	PS
SP	Franklin Life Valuemark Annuities	$15,001 - $50,000	INTEREST	NONE	S
SP	Hartford Mutual Funds, Inc	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Hartford Small Company Fl Cl A	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
SP	ING Invt FDS MAGNACAP A	$1,001 - $15,000	DIVIDENDS	NONE	PS
SP	ING Magna Cap Fund Class A	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	Munder FDS TR Framilington	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Munder Framlington Healthcare Fd Class A	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	PS
	Public Safety Personnel Retirement System; Phoenix, AZ	$15,001 - $50,000	INTEREST	$1 - $200	
SP	Rowe T Price Small Cap	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Scudder Dreman Financial Services Fund Class A	$1,001 - $15,000	DIVIDENDS/CAPITAL GAINS	$1 - $200	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Raul M. Grijalva

SP	Scudder Equity TR New FD	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Seligman Frontier FD CL	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	ST STR RESH Inc, Global	$1,001 - $15,000	DIVIDENDS	$1 - $200	S
SP	Templeton Developing Market	$1,001 - $15,000	DIVIDENDS	NONE	S
SP	Tucson Supplemental Retirement System, Tucson, AZ	$50,001 - $100,000	INTEREST	$5,001 - $15,000	

SCHEDULE IV - TRANSACTIONS

Name Raul M. Grijalva

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Scudder Dreman Financial Services Fund Class A	PS	10-27-03	$1,001 - $15,000
SP	Fidelity Advisor Health Care Fund Class A	PS	10-27-03	$1,001 - $15,000
SP	Munder Framlington Healthcare Fd Class A	PS	5-06-03	$1,001 - $15,000
SP	Hartford Small Company Fl Cl A	PS	10-27-03	$1,001 - $15,000
SP	First American Invt Fds Inc - Tech FD Retail Class A	PS	10-27-03	$1,001 - $15,000
SP	SH ALCOA	PS	12-23-03	$1,001 - $15,000
SP	ING Magnacap Fund Class A	PS	10-27-03	$1,001 - $15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Raul M. Grijalva

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
International Brotherhood of Teamsters	Nov. 13-15	Washington, DC - El Paso, TX- Ciudad Juarez, Mex-Washington, DC	Y	Y	N	N/A
National Federation of the Blind	June 30-July 1	Tucson, AZ - Louisville, KY - Tucson, AZ	Y	N	N	N/A

HAND DELIVERED

7

LEGISLATIVE RESOURCE CENTER

2004 MAY 17 PM 3:57

MC

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A 1
For use by Members, officers, and employees

Luis V. Gutierrez
(Full Name)

2846 N. Riverwalk Chicago, IL 60618
(Mailing Address)

202 225-8203
Daytime Telephone:

(Office Use Only)

Filer Status ☑ Member of the U.S. House of Representatives — State: IL District: 04 ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.

Signature of Reporting Individual: [signature]

Date (Month, Day, Year): May 17, 2004

1746

SCHEDULE I - EARNED INCOME

Name Luis V. Gutierrez | 2

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Ramirez & Company	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Luis V. Gutierrez | 3

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	1634 N. Hermitage Chicago, IL	$500,001 - $1,000,000	Sale	$100,001 - $1,000,000	S
JT	1745 N. Hermitage, Chicago, IL	$250,001 - $500,000	Rent	$15,001 - $50,000	
JT	429 W. Superior Chicago, IL	$1,000,001 - $5,000,000		NONE	P
JT	535 Marina Street, Rio Grande, P.R.	$100,001 - $250,000		NONE	P
JT	615 Calle Vistamar Rio Grande	$100,001 - $250,000	RENT	$5,001 - $15,000	
JT	Charter One	$50,001 - $100,000	INTEREST	$1,001 - $2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Luis V. Gutierrez 4

JT	Congressional Federal Credit Union, D.C.	$15,001 - $50,000	INTEREST	$1 - $200	
JT	First Eagle Global Fund	$15,001 - $50,000	CAPITAL GAINS	$201 - $1,000	
JT	MidAmerica Bank Account	$15,001 - $50,000	INTEREST	$1 - $200	
JT	MidAmerica Bank Account	$100,001 - $250,000	INTEREST	$2,501 - $5,000	
JT	National City Bank	$100,001 - $250,000	INTEREST	$201 - $1,000	
JT	Second Federal Savings Account	$15,001 - $50,000	INTEREST	$201 - $1,000	
SP	Series 1 Savings Bond	$15,001 - $50,000		NONE	P
	Series 1 Savings Bond	$15,001 - $50,000		NONE	P
JT	Western Phase II, LLC	$15,001 - $50,000	INTEREST	$1,001 - $2,500	

SCHEDULE IV - TRANSACTIONS

Name Luis V. Gutierrez 5

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	1634 N. Hermitage Chicago, IL	S	1-16-03	$500,001 - $1,000,000
JT	429 W. Superior Chicago, IL	P	11-14-03	$1,000,001 - $5,000,000
JT	535 Calle Marina Rio Grande, Puerto Rico	P	5-28-03	$100,001 - $250,000
JT	First Eagle Global Fund/Mutual Fund	P	9-30-03	$15,001 - $50,000
	Series 1 Savings Bond	P	7-18-03	$15,001 - $50,000
SP	Series 1 Savings Bond	P	7-18-03	$15,001 - $50,000

SCHEDULE V - LIABILITIES

Name Luis V. Gutierrez | 6

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
JT	First Security Federal Savings Bank, Illinois	Mortgage on 429 W. Superior	$500,001 - $1,000,000
JT	First Security Federal Savings Bank, Illinois	Home equity loan on 1745 N. Hermitage	$250,001 - $500,000
JT	Doral Financial Corporation, Puerto Rico	Mortage on 615 Vistamar, Puerto Rico	$50,001 - $100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Luis V. Gutierrez 7 of 7

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Mexico Illinois Hispanic Chamber of Commerce	Jan. 16-19	Chicago-Jalisco-Chicago	Y	Y	N	3 days
Annenberg Foundation-Bipartisan Congressional Retreat	Feb. 28-March 2	Chicago-Greenbrier-Chicago	Y	Y	Y	3 days
Sociedad Civica Salvadorena	Abril 23-27	Chicago-El Salvador-Chicago	Y	Y	N	5 days
Urban Investment Trust, Inc.	May 30-May 31	Chicago-Santa Barbara-Chicago	Y	Y	N	2 days
Harris County AFL-CIO	June 14-June 14	Chicago-Houston-Chicago	N	N	N	1 day
Alliance Data Systems	June 21-22	Chicago-TX-Chicago	Y	Y	N	2 days
Latin American Working Group-Washington Office on Latin America	Oct. 10-12	Chicago-Ciudad Juarez-Chicago	Y	Y	Y	2 days
CHCI-Sony	Oct.23-26	Chicago-Puerto Rico-Chicago	Y	Y	Y	4 days
Aspira Association	Dec. 4-7	Chicago-Puerto Rico-Chicago	Y	Y	Y	4 days

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
LEGISLATIVE RESOURCE CENTER
2004 MAY 11 PM 5:01
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Rep. Gil Gutknecht
(Full Name)
425 Cannon Office Bldg.
Washington, D.C. 20515
(Mailing Address)
202-225-2472
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: MN District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, §104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gil Gutknecht	5/10/04

1753

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Aldrich Nursery School	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B											Block C						Block D										Block E
			A None	B $1-$1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	DIVIDENDS	RENT	INTEREST	DEPOSITS & MONEY MARKET	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1-$200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X							X																P
			Simon & Schuster		Indefinite														Royalties								X			
			1st Bank of Paducah, KY accounts					X								X								X						
JT	AT+T - stock			X										X			X				X									S
JT	AT+T wireless stock				X												X			X										
JT	Comcast stock				X												X			X										S
JT	Bell South stock						X							X								X								
JT	Lucent stock				X												X			X										
JT	Fastenal stock					X								X							X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gil Gutknecht

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; C $.001 – $15,000; E $50,001 – $100,000; G $250,001 – $500,000; I $1,000,001 – $5,000,000; K $25,000,001 – $50,000,000	DIVIDENDS; INTEREST; EXCEPTED TRUST; Other Type of Income (Specify)	I None; III $201 – $1,000; V $2,501 – $5,000; VII $15,001 – $50,000; IX $100,001 – $1,000,000; XI Over $5,000,000	P, S, E
JT	Nasdaq 100 stock	C X	INTEREST X	None X	
JT	IDLM.03 stock	C X	INTEREST X	None X	P
JT	Affinity Plus cred. union	E X	INTEREST X	III X	
JT	Wells Fargo bank	E X	INTEREST X	III X	
JT	Sterling Bank	C X	INTEREST X	III X	
JT	Garage - 305 C ST NE Washington DC	C X	DIVIDENDS X	III X	
	Fastenal - IRA	C X	DIVIDENDS X	None X	
	Templeton Growth - IRA	E X	reinvested	V NA	
	Oppen. Main St. - IRA	C X	reinvested	V NA	
	Morgan Stanley Money Mkt. IRA	C X	INTEREST X	None X	
	Mn. State Retire. Def. Comp.	C X	INTEREST X	None X	
	Mn. State Retire. Pension	No specific value			
SP	BKYI - IRA	C X	INTEREST X	None X	
SP	Templeton Growth - IRA	C X	reinvested	V NA	
SP	TIAA - CREF (retire.)	C X	INTEREST X	None X	

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Name Gil Gutknecht | Page 5 of 6

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
JT	Comcast stock		X		12-10-03	X									
JT	IDLM.OB stock	X			11-21-03	X									

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Name Gil Gutknecht Page 6 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Chicago Merchantile Exch. & Chicago Bd. of Trade	Mar. 13-17	Wash D.C-W. Palm Beach-Wash. D.C	Y	Y	Y	1 day
U.S. Assoc. of Former members of Congress	Apr. 14-18	Wash DC - Germany - Wash DC	Y	Y	N	N
Chinese International Economic Coop. Association	Jan. 15-20	Wash. DC - TAIWAN - WashDC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

(7) LEGISLATIVE RESOURCE CENTER
HC 2004 MAY -5 AM 11:50
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Ralph M. Hall
(Full Name)

2405 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-6673
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: TX District: 4th	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ralph M. Hall	5-4-04

SCHEDULE I - EARNED INCOME

Name Ralph M. Hall

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of Texas	Legislative Pension	$53,493

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Ralph M. Hall

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Crowley Holding Company Crowley, Texas Banking	$250,001 - $500,000	DIVIDENDS	$15,001 - $50,000	
	Lakeside Bancshares, Inc. Rockwall, Texas Banking	$500,001 - $1,000,000	DIVIDENDS	$15,001 - $50,000	
	Lakeside National Bank Rockwall, Texas Banking	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	North & East Trading Company Rockwall, Texas Real Estate	$250,001 - $500,000		NONE	
	HT Development, Inc. Rockwall, Texas Commercial Real Estate	$1,001 - $15,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Ralph M. Hall

	HT Development LP Rockwall, Texas Commercial Rental	$250,001 - $500,000	RENT	$100,001 - $1,000,000	
	152 Acres, Hunt County, Texas Farm	$100,001 - $250,000		NONE	
SP	22 Acres, Kaufman & Henderson County, Texas Rural Land	$15,001 - $50,000		NONE	
	310 E. Capital Street NW, Apt A, Washington, DC Residence	$100,001 - $250,000		NONE	
	1500 Sunset Hill, Rockwall, Texas Residence	$250,001 - $500,000		NONE	
	4 Acres Sunset Hill Rockwall, Texas Residence	$100,001 - $250,000		NONE	
	Oil Interest Caddo Parrish, La	$1,001 - $15,000		NONE	
SP	Herman Williams Estate - 14% Interest in 896 Acres Kaufman County, Texas Farm	$50,001 - $100,000	CAPITAL GAINS	$15,001 - $50,000	S
SP	Johnnie Mae Williams Estate Inherited	$15,001 - $50,000	CAPITAL GAINS	$2,501 - $5,000	S

SCHEDULE IV - TRANSACTIONS

Name Ralph M. Hall

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Johnnie Mae Williams Estate Inherited	S	12-20-03	$15,001 - $50,000
SP	Herman Williams Estate 14% of 896 Acres Kaufman County, Texas Inherited Farm	S	08-11-03	$50,001 - $100,000

SCHEDULE V - LIABILITIES

Name Ralph M. Hall

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	American Bank Sherman, Texas	Crowley Holding Company Bank Stock Loan	$50,001 - $100,000
	American Bank Sherman, Texas	Mortgage 4 Acres Sunset Hill Rockwall, Texas	$100,001 - $250,000
	North & East Trading Co. Rockwall, Texas	Business Borrowings	$100,001 - $250,000

SCHEDULE VIII - POSITIONS

Name Ralph M. Hall

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman & Director (unpaid)	Crowley Holding Company Crowley, Texas
Chairman & Director (unpaid)	Bank of Crowley Crowley, Texas
President & Director (unpaid)	Lakeside Bancshares, Inc. Rockwall, Texas
Chairman & Director (unpaid)	Lakeside National Bank Rockwall, Texas
Chairman & President (unpaid)	North & East Trading Company Rockwall, Texas
Chairman & Director (unpaid)	Linrock, Inc. Rockwall, Texas
Director & President (unpaid)	HT Development, Inc. Rockwall, Texas
Limited Partner	HT Development Ltd. Rockwall, Texas

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

100
LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 1:31
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

JANE HARMAN

2601 OCEAN FRONT WALK (Full Name) VENICE CA ~~90291~~ 90291 (Mailing Address)

647-3636
310-~~392-1680~~ Daytime Telephone.

Filer Status	[X] Member of the U.S. House of Representatives — State: CA District: 36th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	✓ Jane Harman	✓ 5/15/04

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Name	JANE HARMAN	Page 2 of 13

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	HARMAN INTERNATIONAL INDUSTRIES INC	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JANE HARMAN

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock	G	DIVIDENDS	IV	P
	Examples: Simon & Schuster	Indefinite	Royalties	IX	
	Examples: 1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	BANK ACCOUNTS:				
	City National Bank				
JT	Beverly Hills CA	F	INTEREST	III	
	Citibank				
JT	New York NY	D	INTEREST	II	
	EQUITIES:				
	Harman International				
SP	Industries-Common	L	DIVIDENDS; CAPITAL GAINS	IX	S,E
	Harman International				
SP	Industries-Options	L	Ordinary Income	XI	S,E

Arising from Stock Option Exercise

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JANE HARMAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
JT	Medical Specialities Int'l Inc-Common				X																X											
	Putnam International Growth Class A Fund					X								X										X								
	Fidelity CA Municipal Money Market Fund			X										X								X										
DC	Selected American Shares Mutual Fund							X						X			X								X							
DC	Fidelity Investment MMA				X											X						X										
SP	Sidney Harman 1987 Rev Tr Managed Accounts		SEE	SCHEDULE	A	ATTACHED																										P,S
SP	Sidney Harman Charitable Remainder Trust		SEE	SCHEDULE	B	ATTACHED																										P,S
JT	Jane Harman 15Year Grantor Income Trust		SEE	SCHEDULE	C	ATTACHED																										P,S
JT	Jane Harman 25Year Grantor Income Trust		SEE	SCHEDULE	D	ATTACHED																										P,S
	The Lakes Descendants Trust (See Attachment 3)									X				X	X	X												X				
DC	The Lakes Descendants Trust (See Attachment 3)									X				X	X	X										X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JANE HARMAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	REAL ESTATE LIMITED PARTNERSHIPS:																															
SP	JBG Investment Fund I LP (Holding var interests in comm'l RE See Attchmt 8)									X					X	X	X												X			
SP	JBG Investment Fund II LP (Holding var interests in comm'l RE See Attchmt 9)								X												X											P
SP	Peabody International RE Partners LLC (Holding var interests in comm'l RE and companies See Attchmt 10)							X							X	X					X											P
	INVESTMENT LIMITED PARTNERSHIPS:																															
SP	Arsenal Capital Partners Qualified Purchaser Fund LP (See Attchmt 11)								X												X											
SP	Greenbriar Equity Funds LP (Invests in pvt co's related to transportation industry)						X														X											P
SP	Patricof Private Investment Club LP (See Attchmt 1)					X								X	X	X										X						

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JANE HARMAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I Name; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
SP	Patricof Private Investment Club II LP (See Attchmt 2)	F X	DIVIDENDS X; RENT X; INTEREST X	I X	
SP	Pilgrim America High Income Investment Ltd (See Attchmt 7)	H X	INTEREST X	VII X	
SP	Premier Pacific Vineyards LP (Owns vineyards and wine making facilities in N California and Oregon)	G X	RENT X; INTEREST X	I X	
SP	Rhone Partners LP (See Attchmt 4)	I X	INTEREST X; CAPITAL GAINS X	IX X	
SP	Rhone Partners II LP (See Attchmt 5)	F X		I X	P
SP	Selectinvest LP (See Attchmt 6)	I X	DIVIDENDS X; INTEREST X; CAPITAL GAINS X	VIII X	E
SP	Selectinvest Plus LP (See Attchmt 6)	I X	DIVIDENDS X; INTEREST X; CAPITAL GAINS X	VII X	E
SP	Taconic Capital Partners LP (Holds var investments and hedged positions)	I X	DIVIDENDS X; INTEREST X	IX X	
SP	TWP CEO Founders' Circle (QP) LP (Holds var investments in growth companies)	H X		I X	

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JANE HARMAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Harman International Ind Inc Retirement Plan (Not self Directed) Held at Putnam Investments							X													X										

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SCHEDULE IV — TRANSACTIONS

Name JANE HARMAN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
SP	Exercise Harman Internatl Stock Options			X	6/2/03									X	
SP	Harman International Industries-Common		X		6/20/03							X			
SP	Sidney Harman 1987 Revocable Trust	SEE	SCHEDULE		E ATTACHED)										
SP	Sidney Harman Charitable Remainder Trust	SEE	SCHEDULE		F ATTACHED)										
JT	Jane Harman 15 Year Grantor Income Trust	SEE	SCHEDULE		G ATTACHED)										
JT	Jane Harman 25 Year Grantor Income Trust	SEE	SCHEDULE		H ATTACHED)										
SP	Beta Hedge LP		X		1/23/03							X			
SP	Greenbriar Equity Fund LP	X			3/13/03			X							
SP	Greenbriar Equity Fund LP	X			1/2/03	X									
SP	Greenbriar Equity Fund LP	X			6/30/03	X									
SP	JBG Investment Fund II	X			1/23/03			X							
SP	JBG Investment Fund II	X			5/5/03				X						
SP	Peabody International RE Private Partners LLC	X			2/14/03			X							
SP	Peabody International RE Private Partners LLC	X			4/17/03	X									
SP	Peabody International RE Private Partners LLC	X			6/17/03		X								
SP	Peabody International RE Private Partners LLC	X			8/5/03			X							

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SCHEDULE IV — TRANSACTIONS

Name JANE HARMAN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
SP	Peabody International RE Private Partners LLC	X			10/31/03			X							
SP	Peabody International RE Private Partners LLC	X			12/29/03		X								
SP	Rhone Partners II LP	X			1/29/03	X									
SP	Rhone Partners II LP	X			7/3/03				X						
SP	Selectinvest / Selectinvest Plus LP			X	9/15/03						X				

This page may be copied if more space is required.

Name	JANE HARMAN	Page 10 of 13

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	JP Morgan New York NY (Paid in Full 3/3/03)	Collateralized by US Treas								X		

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
World Economic Forum	Jan 23	Paris France - Davos Switzerland	Y	Y	N	N
	Jan 27	Davos Switzerland - Washington DC	Y	N	N	N
New Democrat Network	Nov 13	Washington DC - San Francisco CA	Y	Y	N	N
	Nov 15	San Francisco CA - Washington DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Jane Harman 15 Year Grantor Income Trust (Expired May 2003)
Trustee	Jane Harman 25 Year Grantor Income Trust
Trustee	The Lakes Descendants Trusts
Trustee	The Lakes Discretionary Grandchildrens Trust
Trustee	The Lakes Descendants Non-Exempt Trusts
Trustee	The Lakes Discretionary Grandchildrens Non-Exempt Trust

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Advisory Board UCLA School of Public Policy and Social Research
Trustee	Smith College (On Leave)
Member	Advisory Committee to Dean of Harvard Law School
Vice-President	The Harman Family Foundation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mag)

Use additional sheets if more space is required

JANE HARMAN
Financial Disclosure Statement

Disclosure Regarding Limited Partnership Interests and Use of Alternative Valuation Methods:

Two basic methods have been used to determine the value of each partnership interest. These methods differ as a result of the information available at the date of filing.

Method 1

Where market value statements were available, the value was determined by applying the ownership percentage of the reporting individual to the total value of the capital account reserved for limited partners. Method 1 was implemented with regard to Patricof Private Investment Club LP, Patricof Private Investment Club II LP, Rhone Partners LP, Rhone Partners II, Selectinvest LP, Selectinvest Plus LP, Pilgrim America High Income, Women's Growth Capital Fund I LLLP, Lakes Investment LLC and Arsenal Capital Partners Qualified Purchaser Fund LP.

Method 2

In some cases market value financial statements were not available. Accordingly, the ending capital balance for the reporting individual was used to value the partnership interest. This method was applied with regard to Greenbriar Equity Funds LP, JBG Investment Fund I LP, JBG Investment Fund II LP, Peabody International Real Estate Partners LLC, Premier Pacific Vineyards LP, Taconic Capital Partners LP and TWP CEO Founders Circle Fund.

JANE HARMAN
Financial Disclosure Statement

Attachment 1 - Patricof Private Investment Club, LP Detail of Investment Positions

Description	Category of Market Value
Marketable Securities:	
Axeda Systems (fka Ravisent)	$1 - $1,000
Genzyme Biosurgery	$1 - $1,000
Tessera Technologies	$1,001 - $15,000
Workstream Inc	$1 - $1,000
Non-Marketable Securities:	
Concord Elevator Holdings (fka Ricon)	$1 - $1,000
Hearthstone Assisted Living Inc	$1,001 - $15,000
Peregrine Semiconductor Corporation	$1,001 - $15,000
US Laboratories	$1 - $1,000

JANE HARMAN
Financial Disclosure Statement

Attachment 2 - Patricof Private Investment Club II, LP Detail of Investment Positions

Description	Category of Market Value
Marketable Securities:	
Axeda Systems	$1,001 - $15,000
RITA Medical	$1,001 - $15,000
Vicuron Pharmaceuticals (fka Versicor Inc)	$1,001 - $15,000
Non-Marketable Securities:	
BlueArc Corporation	$1,001 - $15,000
CML Technologies, Inc	$1,001 - $15,000
Freedom Scientific Inc	$1,001 - $15,000
IntraLinks Inc	$1,001 - $15,000
MeshNetworks	$1,001 - $15,000
MILCOM Technologies Inc	$1,001 - $15,000
National Systems Integrations Inc (fka IntelliSec, Inc)	$1,001 - $15,000
Oblix Inc	$1,001 - $15,000
Opus Medical Inc	$1 - $1,000
Paladin Holdings Inc	$1 - $1,000
Performance Inc	$1,001 - $15,000
Prometheus	$1,001 - $15,000
Vis.align Inc	$1 - $1,000

JANE HARMAN
Financial Disclosure Statement

Attachment 3 – Lakes Descendants Trusts Detail of Investment Positions

Investment positions held at the end of the year in the Lakes Descendants Trusts are as follows:

Women's Growth Capital Fund I, LLLP

Description	Category of Market Value
Cash and cash equivalents	$1,001 - $15,000
BuyerZone.Com	$1,001 - $15,000
CommuniSpace	$15,001 - $50,000
Cylex	$1,001 - $15,000
Paratek Microwave	$1,001 - $15,000
VIP Desk.com	$15,001 - $50,000

Lakes Investment LLC

Description	Category of Market Value
General CA Municipal – MMF	$15,001 - $50,000
Equities:	
American Technology	$50,001 - $100,000
Berkshire Hathaway Inc	$100,001 - $250,000
Harman International Ind	$250,001 - $500,000
Safeway Inc	$15,001 - $50,000
Standard & Poors Depositary	$100,001 - $250,000
Ford Mtr Co Cap Tr II Pfrd	$15,001 - $50,000

JANE HARMAN
Financial Disclosure Statement

Attachment 3 – Lakes Descendants Trusts Detail of Investment Positions (Continued)

Description	Category of Market Value
California Tax Exempt Municipal Bonds:	
Alhambra CA Crfs Partn Clubhouse Fac	$1,001 - $15,000
Alisal CA USD GO 5/1/00	$15,001 - $50,000
CA Health Facs FING Auth Rev Mls Pen Hlth B	$15,001 - $50,000
CA Hsg Fin Agy Rev Home Mtg Ser B	$15,001 - $50,000
CA Hsg Fin Agy Rev Home Mtg Ser J	$15,001 - $50,000
CA Hsg Fin Agy Rev Home Mtg Ser R	$15,001 - $50,000
CA Hsg Fin Agy Rev Home Mtg Ser N	$15,001 - $50,000
CA Hsg Fin Agy Sglfam Mtg B-3	$1,001 - $15,000
CA State G/O 3/1/94	$15,001 - $50,000
CA State G/O 10/1/84	$1,001 - $15,000
CA State G/O 8/1/86	$15,001 - $50,000
CA State G/O 2/1/91	$1,001 - $15,000
CA State G/O 8/1/94	$15,001 - $50,000
CA State G/O 10/1/92	$1,001 - $15,000
CA State Var Purp TCRS	$1,001 - $15,000
CA State Pub Wks Brd Lse 10/1/92	$1,001 - $15,000
CA State Pub Wks Brd Lse 4/1/96	$1,001 - $15,000
CA State Pub Wks Brd Lse 8/1/93	$15,001 - $50,000
CA State Pub Wks Brd Lse 10/1/93	$15,001 - $50,000
CA State Pub Wks Brd Lse 4/1/94	$1,001 - $15,000
CA Statewide Cmnty Dev Corp COPS-J Paul Getty Tr	$15,001 - $50,000
CA Statewide Cmnty Dev St Joseph Hlth	$15,001 - $50,000
CA Statewide Cmnty Dev Childrens Hosp	$15,001 - $50,000
CA Statewide Cmnty Dev State Insd	$15,001 - $50,000
Campbell CA USD	$15,001 - $50,000
Chico CA Pub Fin Auth Tax	$1,001 - $15,000
Coast Cmnty College Dist	$1,001 - $15,000
Corona-Norco CA Uni Sch Dist	$1,001 - $15,000
Costa Mesa CA Pub Fing Auth	$1,001 - $15,000
Cucamonga CA Sch Dist CTFS	$15,001 - $50,000
Culver City CA GO USD	$1,001 - $15,000
Desert Sands Ca USD	$15,001 - $50,000

JANE HARMAN
Financial Disclosure Statement

Attachment 3 – Lakes Descendants Trusts Detail of Investment Positions (Continued)

Description	Category of Market Value
East Bay CA MUD Wtr System	$250,001 - $500,000
Escondido CA USD	$1,001 - $15,000
Fallbrook CA USD	$15,001 - $50,000
Fresno CA Crfs Partn Cap Impt Refing Proj	$15,001 - $50,000
Guam Pwr Auth Rev Ser A	$100,001 - $250,000
Kern CO CA Brd Ed CTFS	$1,001 - $15,000
La Quinta CA Redev Agy	$50,001 - $100,000
Lancaster CA Redev Agy Tax Alloc RFDG	$1,001 - $15,000
Lemoore CA Uni High Sch Dist RFDG	$15,001 - $50,000
Loomis CA Un Sch Dist G/O	$15,001 - $50,000
LA CA GO Ser A	$1,001 - $15,000
LA CA CTFS Partn RFDG Real Ppty	$15,001 - $50,000
LA CA Harbor Dept	$15,001 - $50,000
LA CA USD	$15,001 - $50,000
LA CO CA Cap Asset Leasing Ser A	$15,001 - $50,000
LA CO CA Pub Wks Fing Au Lse Rev	$1,001 - $15,000
LA CO CA Met Transn Sls Tx	$15,001 - $50,000
LA CO CA Pub Wrks Fin Auth Lse	$1,001 - $15,000
LA CO CA Pub Wrks Prks & Open Space	$1,001 - $15,000
Metropolitan WTR Dist So CA Wtrwks	$1,001 - $15,000
Metropolitan WTR Dist SO RFDG	$100,001 - $250,000
Montebello CA Cmnty Redev Agy 6/1/97	$50,001 - $100,000
Nevada Irr Dist CA CTFS	$1,001 - $15,000
Parlier CA USD Ser B	$1,001 - $15,000
Placentia-Yorba Linda CA USD	$1,001 - $15,000
Pleasanton CA USD Ser J	$1,001 - $15,000
Pleasanton CA USD Ser K	$1,001 - $15,000
Pomona CA Pub Fing Auth	$15,001 - $50,000
Port Oakland CA Port Rev	$1,001 - $15,000
Porterville CA CRFS Partn Swr Sys	$1,001 - $15,000
Rancho CA Wtr Dist Spl Tax	$1,001 - $15,000
Redlands CA GO RFDG CGIC	$15,001 - $50,000
Ripon CA GO USD	$50,001 - $100,000
Sacramento CA City Fing Auth	$1,001 - $15,000
Sacramento CA MUD Elec Rev	$1,001 - $15,000

JANE HARMAN
Financial Disclosure Statement

Attachment 3 – Lakes Descendants Trusts Detail of Investment Positions (Continued)

Description	Category of Market Value
Saddleback Vy USD	$1,001 - $15,000
San Bernardino CA Jt Pwrs	$1,001 - $15,000
San Bernardino Cnty CA COPS	$15,001 - $50,000
San Bernardino Cnty CA Transn	$15,001 - $50,000
San Diego CA Open Space Pk FACS	$1,001 - $15,000
San Diego CO CA CTF Partn RFDG	$1,001 - $15,000
San Diego CA Regl Transn Commn Sls Tx	$15,001 - $50,000
San Francisco Ca Cty&CO RDA 0 Cpn	$1,001 - $15,000
San Francisco CA City & CO Intl Arprt Ser 7A	$1,001 - $15,000
San Francisco CA City & CO Intl Arprt Ser 9B	$1,001 - $15,000
San Francisco CA City & CO Intl Arprt Ser 10A	$1,001 - $15,000
San Joaquin Hills CA Transn Corridor Agy	$1,001 - $15,000
San Jose CA GO Fing Auth 4th & San Fernando Pkg Fac	$15,001 - $50,000
Santa Ana CA Fing Auth Wtr Rev	$15,001 - $50,000
Santa Ana CA Uni Sch Dist	$50,001 - $100,000
Santa Monica Malibu USD	$1,001 - $15,000
Santa Rosa CA Hosp Rev	$1,001 - $15,000
Turlock CA Irr Dist Rev	$1,001 - $15,000
Vallejo CA Rev Ref Str Impt	$15,001 - $50,000
West Sacramento CA Fing Auth	$15,001 - $50,000
Wheeler Ridge-Maricopa CA Wtr Storage	$15,001 - $50,000

Attachment 4 - Rhone Partners, LP Detail of Investment Positions

Description	Category of Market Value
Primus International	$250,001 - $500,000
American Remanufacturers Inc (fka Car Component Technologies Inc)	$250,001 - $500,000
Home Fragrance Holdings Inc	$50,001 - $100,000
Terphane Inc	$50,001 - $100,000
Terphane Ltd	$15,001 - $50,000
De Dietrich	$15,001 - $50,000
Nation One Mortgage Company Inc	$1,001 - $15,000
WVNY (Burlington VT)	$15,001 - $50,000

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Financial Disclosure Statement

Attachment 5 – Rhone Partners II, LP Detail of Investment Positions

Descriptions	Category of Market Value
Fraikin Goupe	$100,001 - $250,000

Attachment 6 – Selectinvest LP & Selectinvest Plus LP Detail of Investment Positions

Description	Category of Market Value
Cash & Other	$100,001 - $250,000
Global Event-Driven/Multi-Strategy:	
Perry Partners LP	$100,001 - $250,000
Satellite Fund II LP	$100,001 - $250,000
Farallon Capital Offshore Investors Inc	$100,001 - $250,000
OZ Domestic Partners LP	$100,001 - $250,000
Amaranth Partners LLC	$100,001 - $250,000
Davidson Kempner Partners	$100,001 - $250,000
Canyon Value Realization Fund LP	$100,001 - $250,000
Mariner Partners LP	$100,001 - $250,000
Brencourt Multi-Strategy	$50,001 - $100,000
European Event Driven:	
Castlerigg Partners LP	$100,001 - $250,000
K Capital	$100,001 - $250,000
OZ Europe Domestic Partners LP	$100,001 - $250,000
Bailey Coates Cromwell Fund LP	$15,001 - $50,000
Fixed Income Trading:	
Vega Relative Value Fund Limited	$100,001 - $250,000
Rockwood Partners LP	$100,001 - $250,000
BlueCrest Capital LO	$100,001 - $250,000
Alliance High Grade Strategy Partners LP	$100,001 - $250,000
Graham Global Investment Fund – Fed Policy	$50,001 - $100,000
FrontPoint FIO Investors LP	$50,001 - $100,000
Eagle Yield LLC	$15,001 - $50,000
San Gabriel Opportunity Fund LLC	$15,001 - $50,000

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Attachment 6 – Selectinvest LP & Selectinvest Plus LP Detail of Investment Positions (Continued)

Description	Category of Market Value
Distressed Securities Investing:	
Silver Point Capital Fund LP	$100,001 - $250,000
Triage Capital Management LP	$100,001 - $250,000
King Street Capital LP	$100,001 - $250,000
Cerberus Partners LP	$100,001 - $250,000
Satellite Credit Opportunities Fund Ltd	$50,001 - $100,000
OZF Credit Opportunities Fund LP	$15,001 - $50,000
Credit Arbitrage:	
Trilogy Financial Partners LP	$100,001 - $250,000
Feingold O'Keefe	$100,001 - $250,000
CQS Cap Structure Arb	$50,001 - $100,000
Convertible Arbitrage:	
Silverback	$100,001 - $250,000
Akela	$100,001 - $250,000
Argent Low Lev	$100,001 - $250,000
Alta Partners LP	$50,001 - $100,000
Marathon Global Convertible Fund LP	$50,001 - $100,000
Growth:	
Ascot Partners LP	$100,001 - $250,000
The Long Horizons Fund LP	$100,001 - $250,000

Attachment 7 – Pilgrim America High Income Detail of Investment Position

Description	Category of Market Value
Capital Note due 2009	$500,001 - $1,000,000

JANE HARMAN
Financial Disclosure Statement

Attachment 8 – JBG Investment Fund I LP Detail of Holdings

Various interests in real estate properties held are as follows:

Office Properties-
- 2440 M Street NW, Washington DC
- Dulles Business Park, Chantilly VA
- Austin Technology Park, Austin TX
- DOT Headquarters, Washington DC
- Silver Spring (M&S) Office, Silver Springs MD
- 801 Thompson Avenue, Rockville MD

Residential Properties-
- 1210 Mass Ave, NW Development, Washington DC
- 2400 M Street, NW, Washington DC
- 1111 25th Street, Washington DC
- 1300 N Street, NW Development, Washington DC
- 705 6th Street, NW
- 717 6th Street, NW Development, Washington DC
- 715 G Street NW, Condo, Washington DC
- 915 E Street NW, Washington DC
- Silver Spring (AT&T), Silver Spring MD
- Silver Spring (M&S) – Residential, Silver Spring MD
- Reston Square Residential, Reston VA
- 555 Mass Avenue, NW (Res), Washington DC
- 1700 Duke Street, Alexandria VA
- Market Square (Kodak & TA Site), Gaithersburg MD
- Woodmont, Montgomery Co MD

Mixed Use Properties-
- Waterview, Arlington VA
- Twinbrook Metro Park, Montgomery Co MD
- Central Place, Arlington VA

Hotel Properties-
- Sheraton Reston, Reston VA
- Hampton Inn, Washington DC
- Square 369, Washington DC

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Financial Disclosure Statement

Attachment 9 – JBG Investment Fund II LP Detail of Holdings

Various interests in real estate properties held are as follow:

Office Properties-
2440 M Street, Washington DC
Dulles Business Park, Chantilly VA
Chase Tower, Montgomery Co MD
1801 North Lynn, Rosslyn VA
Rosslyn Gateway, Arlington Co VA
Woodglen, Montgomery Co MD

Residential Properties-
Hickory Place, Prince Georges Co MD
Mallard Courts, Alexandria VA

Attachment 10 – Peabody International Real Estate Private Partners LLC Detail of Holdings

Various investments in commercial real estate properties and companies located outside the United States as follows:

Investment	Type	Location
G Accion SA de CV	Office/Industrial Operator	Mexico
HPE Property Holding GmbH	Commercial/Residential Developer	Germany
Madrid Palace	Residential Conversion Developer	Spain
Alitalia Headquarters	Office Building Developer	Rome

Jane Harman
Financial Disclosure Statement

Attachment 10 – Peabody International Real Estate Private Partners LLC Detail of Holdings (Continued)

Investment	Type	Location
BEG SA	Retail Developer	Europe
Inversiones y Representaciones SA IRSA	Diversified Operator/Developer	Argentina
Hausbau HRP	Residential Operator	Germany
Auriga Immobiliare Srl Unim Residential	Residential Operator	Italy
Iniziative Negozi Srl Unim Retail	Retail Properties	Italy
Uniorias Due Srl Unim Commercial	Office Properties	Italy
Erste Hausbau Portfolio GmbH Mannheimer	Residential Properties	Germany
Peabody Cutlers Gardens LP Cutler Gardens Estate	Office Properties	England
PI France 1 Sarl Diamonds Portfolio	Office Properties	France
Peabody Meguro LLC Meguro Apartments	Commercial/Residential Property	Japan
Peabody Global Kanagawa Kanagawa Apartments	Commercial/Residential Property	Japan
CWE Holding I LLC London West End	Commercial/Residential Properties	England
Mexico City Condos	Residential Property	Mexico

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Financial Disclosure Statement

Attachment 11 – Arsenal Capital Partners Qualified Purchaser Fund LP Detail Of Investment Positions

Description	Category of Market Value
Interdynamics Holdings Inc	$100,001 - $250,000
Renaissance Mark Holdings Corp	$250,001 - $500,000
TallyGenicom Holdings LLC	$250,001 - $500,000

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B											BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset											Type of Income							Amount of Income											Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Goldman Sachs ST Durat Govt								X					X														X				S
SP	Goldman Sachs Institutional Liquid									X				X										X								
SP	Goldman Sachs Grp 0% 6/5/09 Nikkei Bffrd							X												X												P
SP	Apple Computer						X																									
SP	Charles One Fini Inc			X										X							X											
SP	McGraw Hill Cos Inc				X									X								X										
SP	Stanley Works				X									X									X									S
SP	ABN Amro Hlds NV ADR				X									X			X						X									P
SP	Aventis ADR					X								X																		P
SP	BAA PLC Spon ADR				X															X					X							S
SP	BAE Systems PLC ADR				X									X			X					X										P
SP	Bank Fukuoka Ltd ADR				X									X												X						P,S
SP	Bank of East Asia Ltd ADR			X										X			X									X						P,S
SP	Bank of Ireland Spon ADR					X								X			X							X								S
SP	Barclays PLC ADR				X									X			X								X							S
SP	BNP Paribas ADR				X									X			X							X								P
SP	BOC Group PLC ADR					X								X									X									P
SP	BT Group PLC ADR				X									X											X							S
SP	Buhrmann NV Spon ADR			X													X							X								P,S
SP	Bunzl PLC Spon ADR				X									X			X										X					P,S
SP	Canon Inc ADR					X								X			X						X									P
SP	Centrica PLC ADR				X									X									X									S
SP	China Mobile Hong Kong ADR				X									X			X															P
SP	Danske BK ADR				X												X				X					X						P,S
SP	DBS Group Hldgs ADR					X								X			X									X						P,S
SP	Deutsche Bank AG				X									X										X								
SP	Deutsche Lufthansa AG ADR				X									X												X						P,S
SP	E.On E AG ADR					X								X			X								X							S
SP	EDP Electricidade De Portugal ADR				X									X			X									X						P,S
SP	Eisai Co Ltd ADR				X									X											X							S
SP	Endesa SA ADR					X								X										X								P,S
SP	ENI SPA ADR				X									X			X								X							P,S
SP	Fortis NL ADR					X								X									X									P
SP	Fuji Heavy Ind Ltd ADR				X									X																		P
SP	Fuji Photo ADR					X								X							X											
SP	GKN PLC ADR					X								X										X								
SP	Glaxosmithkline PLC ADR					X								X																		P
SP	Hachijuni Bank Ltd ADR				X									X			X				X					X						P,S
SP	Hellenic Telecom Organ SA				X									X									X									P,S
SP	Honda Motor LTD						X										X				X											S
SP	Hunter Douglas NV ADR		X														X								X							P,S
SP	J Sainsbury PLC ADR				X									X			X															

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Tmactn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	KAO Corp ADR					X								X									X									P
SP	Koninklijke Philips Electrs NV ADR				X									X			X								X							S
SP	Korea Electric Power ADR				X									X			X						X									P,S
SP	Lloyds TSB Group PLC ADR				X																X											P
SP	Marks & Spencer PLC ADR				X																X											P
SP	Minebea Co Ltd ADR						X							X									X									P
SP	MTR Corp Ltd ADR				X									X										X								P
SP	National Australia Bank Limited ADR				X									X									X									P
SP	Nedcor Ltd ADR				X									X									X									P
SP	Nestle Sa ADR					X								X										X								P
SP	Nippon Teleg & Tel ADR				X									X			X							X								P,S
SP	Nokia Corp ADR				X									X			X								X							S
SP	Novartis AG ADR					X								X										X								P
SP	Portugal Telecom SGPS SA ADR				X									X			X									X						S
SP	Rexam PLC ADR				X									X										X								P
SP	San Paolo IMIS PA ADR			X										X			X							X								S
SP	Santos Ltd ADR				X									X			X								X							S
SP	Sekisui Homes Ltd ADR				X									X			X							X								P,S
SP	Shiseido Co Ltd ADR					X															X											P
SP	Sun Hung Kai Prop Ltd ADR				X									X			X								X							P,S
SP	Swire Pacific Ltd ADR				X									X			X							X								S
SP	TDK Corporation ADR				X									X			X							X								S
SP	Telecentro Oeste Celular Participacoes ADR			X																	X											
SP	Telecom Corp of New Zealand ADR				X									X			X								X							S
SP	Telecomunicacoes Brasileiras SA ADR			X										X			X								X							S
SP	Telefonos De Mexico SA ADR				X									X									X									P
SP	Thomson SA ADR					X								X			X								X							P,S
SP	Toyota Motor Corp ADR					X								X			X							X								P,S
SP	UBS AG					X								X			X							X								S
SP	United Microelectronics ADR				X												X								X							P,S
SP	UPM Kymmene Corp				X																X											P
SP	Volkswagon AG ADR				X									X			X								X							P,S
SP	Wolters Kluwer ADR				X																X											P
SP	Zurich Fincl Svcs ADR					X															X											P
SP	US Notes (Treasury Inflation Indexed)	X														X												X				S
SP	Allied Domecq PLC ADR	X												X									X									S
SP	Autoliv Inc	X												X								X										S
SP	Australia & New Zealand Bkg Grp	X												X			X								X							P,S
SP	Cadbury Schweppes PLC ADR	X												X			X						X									S
SP	Creative Technology	X															X								X							S
SP	Konami Co Ltd ADR	X												X			X								X							S
SP	Matsushita Elec Indl ADR	X															X								X							P,S

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C						BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset												Type of Income						Amount of Income											Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Nissan Motor Co Ltd ADR	X												X			X								X						S
SP	Pernod Ricard ADR	X												X			X									X					P,S
SP	Petrochina Co ADR	X															X						X								S
SP	Petroleo Brasileiro SA ADR	X												X			X								X						S
SP	Roche Holding AG ADR	X												X			X									X					P,S
SP	Shell Trans & Trading PLC	X															X								X						S
SP	Statoil ASA ADR	X															X						X								S
SP	Telecom Italia Spa ADR	X															X								X						P,S
SP	Unilever PLC ADR	X															X							X							S
SP	JP Morgan Cash Management Fund				X											X							X								

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Harman International Industries											X		X													X						
SP	Goldman Sachs Inst Lt Asset Muy Mkt								X					X																			
SP	Goldman Sachs Core Fixed Inc A									X				X			X															S
SP	Goldman Sachs High Yield A								X					X			X												X			S
SP	Goldman Sachs ST Durat Govt	X												X							X								X			S
SP	Goldman Sachs Emerging Mkts Eq Class A								X																							
SP	Goldman Sachs Grwth Opp Class A									X							X												X			S
SP	AB Svensk Exportkredit MTN 7/15/05									X											X											P
SP	AB Svensk Exportkredit 1/31/06	X															X										X					P,S
SP	ABN Amro Hlds NV ADR			X										X			X							X								P,S
SP	Allied Domecq PLC ADR	X												X									X									S
SP	Australia & New Zealand Bkg Grp ADR	X												X			X							X								P,S
SP	Autoliv Inc	X												X			X															S
SP	Aventis Spon ADR				X									X									X									P,S
SP	BAA PLC ADR			X																	X											P
SP	BAE Systems PLC ADR			X										X			X						X									S
SP	Bank Fukuoka Ltd ADR			X										X								X										P
SP	Bank of East Asia Ltd ADR			X										X			X							X								P,S
SP	Bank of Ireland ADR				X									X									X									P,S
SP	Barclays PLC ADR			X										X			X							X								S
SP	BNP Paribas ADR				X									X									X									S
SP	BOC Group PLC ADR				X									X									X									P
SP	BT Group PLC ADR			X										X									X									P
SP	Buhrmann NV ADR			X													X							X								S
SP	Bunzl PLC ADR			X										X									X									P,S
SP	Cadbury Schweppes PLC ADR	X												X									X									S
SP	Canon Inc ADR				X									X			X							X								P,S
SP	Centrica PLC ADR			X										X									X									P
SP	China Mobile Hong Kong Ltd ADR			X										X			X						X									S
SP	Creative Technology Ltd	X															X							X								S
SP	Danske Bank ADR			X																	X											P
SP	DBS Group Hldgs ADR				X									X			X							X								P,S
SP	Deutsche Bank AG			X										X			X								X							P,S
SP	Deutsche Lufthansa AG ADR			X										X									X									
SP	E.On AG ADR				X									X			X							X								P,S
SP	EDP Electricidade De Portugal ADR			X										X			X							X								S
SP	Elisa Co Ltd ADR				X									X			X							X								P,S
SP	Endesa SA ADR				X									X			X								X							S
SP	ENI SPA ADR			X										X			X						X									P,S
SP	Fortis NL ADR				X									X									X									P,S
SP	Fuji Heavy Ind Ltd ADR			X										X							X											P
SP	Fuji Photo ADR				X									X							X											P

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

BLOCK A		BLOCK B											BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset											Type of Income							Amount of Income											Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Exempted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	GKN PLC ADR				X									X									X									
SP	Glaxosmithkline PLC ADR				X									X									X									
SP	Hachijuni Bank Ltd ADR			X										X								X										P
SP	Hellenic Telecom Organization SA ADR			X										X			X							X								P,S
SP	Honda Mtr Ltd ADR				X									X									X									P,S
SP	J Sainsbury PLC ADR			X										X			X															P,S
SP	KAO Corp ADR				X									X									X									P,S
SP	Konami Co Ltd	X												X			X							X								S
SP	Koninklijke Philips Electrs NV ADR			X										X			X						X									S
SP	Korea Electric Pwr Corp ADR			X										X			X						X									P,S
SP	Lloyds TSB Group PLC ADR			X																X												P
SP	Marks & Spencer PLC ADR			X																X												P
SP	Matsushita Elec Indl ADR	X															X							X								P,S
SP	Mitsubsh Co Ltd ADR				X									X									X									P
SP	MTR Corp Ltd ADR			X										X									X									
SP	National Australia Bank Ltd ADR				X									X									X									P
SP	Nedcor Ltd ADR			X										X									X									P
SP	Nestle SA ADR				X									X									X									P
SP	Nippon Teleg & Tel ADR			X										X			X						X									P,S
SP	Nokia Corp ADR			X										X									X									S
SP	Novartis AG ADR				X									X									X									P
SP	Pernod Ricard ADR	X												X									X									P,S
SP	Petrochina Co Ltd ADR	X															X						X									S
SP	Petroleo Brasileiro SA ADR	X												X			X							X								S
SP	Portugal Telecom SGPS SA ADR			X													X						X									S
SP	Rexam PLC ADR			X										X																		P
SP	Roche Holding AG ADR	X												X			X							X								P,S
SP	San Paolo IMI S PA ADR			X										X			X							X								S
SP	Santos Ltd ADR			X										X			X															S
SP	Sekisui Homes Ltd				X									X									X									P,S
SP	Shiseido Co Ltd ADR				X															X												P
SP	Statoil ASA ADR	X															X						X									S
SP	Sun Hung Kai Prop Ltd ADR			X										X			X							X								P,S
SP	Swire Pacific Ltd ADR			X										X			X						X									S
SP	TDK Corporation ADR			X										X			X							X								S
SP	Telecom Corp of New Zealand ADR			X										X			X							X								S
SP	Telecom Italia SPA ADR	X															X															P,S
SP	Telecomunicacoes Brasileiras SA ADR			X										X			X							X								S
SP	Telefonos De Mexico SA ADR			X										X									X									P
SP	Thomson SA ADR				X									X			X						X									P,S
SP	Toyota Motor Corp ADR				X									X			X						X									P,S
SP	UBS AG				X												X					X										S

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	BLOCK D Amount of Income I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transctn
SP	United Microelectronics ADR			X													X							X								P,S
SP	UPM-Kymmene Corp ADR			X																	X											P
SP	Volkswagon AG ADR			X													X							X								P,S
SP	Wolters Kluwer ADR			X																												P
SP	Zurich Financial Services ADR				X																X											P,S
SP	Air Products & Chemicals Inc				X																X											P
SP	Allstate Corp	X												X									X									P
SP	American Express Co			X										X									X									P,S
SP	Apache Corp	X			X												X				X											P,S
SP	Archer Daniels Midland Co					X								X									X									P,S
SP	Bank of America Corp						X							X									X									S
SP	Bellsouth Corp	X												X										X								P
SP	Caterpillar Inc	X												X									X									P,S
SP	Cinergy Corp			X													X							X								P,S
SP	Citigroup Inc				X									X								X										S
SP	Comcast Corp				X									X			X							X								P
SP	Cox Communications	X																			X											S
SP	Deere & Co	X															X						X									P
SP	Dow Chemical Co				X									X			X											X				P,S
SP	Eastman Kodak Co	X												X			X						X									P,S
SP	Emerson Electric Co				X									X			X						X									P,S
SP	Exelon Corp			X																	X											S
SP	Fannie Mae Common Stock				X									X									X									P
SP	Fleet Boston Fincl Corp			X										X									X									P
SP	Guidant Corp	X												X									X									P
SP	HJ Heinz Co	X															X							X								P
SP	Hartford Fincl Svcs Grp Inc				X									X			X								X							P,S
SP	Hasbro Inc	X												X									X									P,S
SP	Intl Business Machines Corp			X													X						X									P,S
SP	Intl Paper Co			X										X							X											P,S
SP	Johnson & Johnson				X									X									X									P
SP	Kellogg Co				X									X									X									S
SP	Keyspan Corp	X												X									X									P,S
SP	Kimberly Clark Corp				X									X									X									P,S
SP	Knight Ridder Inc	X												X									X									S
SP	Kroger Co	X															X						X									P
SP	Lockheed Martin Corp				X												X							X								P,S
SP	Mellon Fincl Corp				X									X							X											P,S
SP	Merrill Lynch Co Inc				X																X											P
SP	Metlife Inc				X									X							X											P,S
SP	Microsoft Corp	X															X															P
SP	Motorola Inc			X										X			X							X								P,S

JANE HARMAN
SCHEDULE III ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

BLOCK A		BLOCK B												BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income											Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	National City Corp	X												X			X							X								S
SP	Nike Class B	X												X			X						X									S
SP	Nstar	X												X			X							X								S
SP	Nortel Networks Corp	X															X								X							P,S
SP	Novellus Systems Inc	X															X						X									P,S
SP	Northrop Grumman Corp				X									X								X										P
SP	Novartis AG ADR				X									X									X									P
SP	Pepsico Inc	X												X			X							X								P,S
SP	Pfizer Inc				X									X									X									S
SP	PPG Industries Inc				X									X									X									P
SP	PPL Corporation			X										X								X										P
SP	Reed Elsevier PLC ADR				X									X									X									S
SP	Roche Holding AG ADR			X																	X											P
SP	SBC Communications Inc				X									X									X									P,S
SP	Schering-Plough Corp				X									X									X									P
SP	Sears Roebuck & Co			X																	X											P
SP	St Paul Travelers Companies(Trvlrs Ppty&Casty)				X									X									X									P
SP	Starwood Hotels & Resorts Inc	X															X							X								P,S
SP	Southtrust Corp	X												X			X							X								S
SP	Suntrust Banks Inc				X									X									X									P
SP	Syngenta AG ADR				X									X								X										P,S
SP	Texas Instruments Inc	X												X			X								X							P,S
SP	Time Warner Inc				X																X											P
SP	Tribune Co New			X										X			X						X									P,S
SP	TXU Corp			X										X			X							X								P,S
SP	Union Pacific Corp				X									X								X										P
SP	Verizon Communications				X									X									X									P
SP	Viacom Inc Cl B				X									X								X										P
SP	Wachovia Corp	X												X			X								X							S

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 15 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B											BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset											Type of Income							Amount of Income											Trnsctn
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Fidelity California Muni MMF	X											X									X									
SP	Scudder International Cl S	X											X									X									Distrbtn
SP	Vanguard Index Trust S&P 500	X											X			X											X				S
SP	Harman International Industries	X											X										X								S
SP																															Distrbtn
SP																															
SP																															
SP																															
SP																															
SP																															
SP																															

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C							BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Blum Strategic Partners II LP								X					X			X									X						P
SP	Goldman Sachs Hedge Fnd Prtnrs LLC									X				X			X										X					P
SP	Goldman Sachs Strtgc Eur Prtnrs LP									X											X											P
SP	JBC/Fund III Investor LLC							X						X	X	X	X								X							
SP	Pope Resources LP					X															X											
SP	Julius Baer Int'l Equity								X					X												X						P
SP	Fidelity Ca Muni MM								X					X											X							
SP	ADE Corp					X															X											
SP	Aehr Test Sys				X																X											
SP	Allte! Corp					X															X											S
SP	Apple Computer Inc				X																X											S
SP	Bandag Inc				X																X											S
SP	BankNorth Grp Inc				X									X			X									X						S
SP	Bear Stearns Cos Inc				X									X			X										X					S
SP	Belo Corporation Ser A				X									X								X										F
SP	Charter One Finl Inc				X									X								X										P,S
SP	Chittenden Corp	X															X								X							S
SP	Cognos Inc	X															X									X						S
SP	Computer Assoc Intl Inc						X														X											S
SP	Connecticut Bancshares Inc				X									X			X											X				S
SP	Countrywide Fincl Corp				X									X			X									X						S
SP	Datascope Corp				X												X								X							S
SP	Dow-Jones & Co	X															X									X						P,S
SP	Dundee Bancorp Inc					X															X											S
SP	Eastman Kodak Co				X																X											P
SP	Electro Rent Corp					X															X											
SP	FAB Inds Inc			X																	X											S
SP	Fahnestock Viner Hldgs Inc	X															X								X							S
SP	Fidelity Bankshares Inc				X									X			X									X						S
SP	Forest City Enterp Inc					X								X			X									X						S
SP	Gannett Co Inc					X								X			X										X					S
SP	Harrahs Entmt	X															X											X				S
SP	Imation Corp				X									X			X											X				S
SP	Independence Cmnty Bk Corp				X									X			X											X				S
SP	International Game Technology	X															X									X						S
SP	Interstate Bakeries	X															X															S
SP	Kimball Intl Inc			X										X							X											S
SP	Knight Ridder Inc				X									X			X									X						S
SP	Lawson Products Inc				X									X			X								X							S
SP	Marcus Corp	X												X			X									X						S
SP	McClatchy Co				X												X															S
SP	McGraw-Hill Companies Inc				X									X							X											P

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C						BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income						Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Mentor Graphics Corp				X																X											S
SP	Mercantile Bankshares Corp				X									X								X										P
SP	Mine Sfty Appliances Co				X									X			X										X					S
SP	NCR Corp					X															X											S
SP	New York Times Co				X									X			X									X						S
SP	Oppenheimer Hodgs Inc				X									X								X										
SP	Penn Engr & Mfg Corp				X									X								X										S
SP	Peoplesoft Inc			X																	X											P,S
SP	Pope Res Del Ltd Dep Rcpt				X																X											
SP	Progress Software Corp				X												X									X						S
SP	Qualcomm Inc				X									X			X										X					S
SP	Quantum Corp DSSG				X																X											S
SP	Radioshack				X																X											P
SP	Raymond James Fint Inc				X									X			X							X								S
SP	Ryans Family Steak House				X												X									X						S
SP	Scientific Atlanta Inc					X								X			X								X							S
SP	Skyline Corp				X									X								X										
SP	Storage Technology Corp				X												X										X					S
SP	Sybase Inc			X																	X											P
SP	The Topps Company Inc				X									X								X										S
SP	Triumph Grp Inc				X																X											S
SP	UCBH Holdings Inc	X															X									X						S
SP	Universal Health REIT					X								X			X								X							P,S
SP	Valassis Communications	X															X									X						S
SP	Vtrco MFG C.			X																	X											S
SP	Washington Mutual Inc				X									X			X									X						S
SP	Weis Markets Inc				X									X								X										S
SP	West Pharmaceutical Svcs Inc				X									X								X										S
SP	Goldman Sachs Instl Liq Asset TF MMA									X				X												X						
SP	Goldman Sachs High Yield Mutual Fnd									X				X													X					P
SP	Goldman Sachs Grp Inc 0% Nikkei Eln							X													X											P
SP	AB Svensk Exportkredit 7/15/05								X												X											P
SP	Harman International Inds Inc										X			X											X							
SP	3M Co					X								X			X							X								P,S
SP	Abbott Laboratories Conn	X												X			X							X								P,S
SP	Accenture Ltd				X																X											S
SP	Aflac Inc			X										X								X										P
SP	Air Products & Chemicals Inc				X																X											P
SP	Amer Intl Grp Inc				X									X								X										S
SP	Amgen Inc					X															X											
SP	ASML Holding NV ADR				X																X											P
SP	Automatic Data Processing Inc	X												X									X									S

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C							BLOCK D										
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income										
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Baxter Intl Inc	X												X									X									S
SP	Boston Scientific Corp					X															X											P
SP	Cardinal Health Inc				X									X									X									S
SP	Cisco Systems Inc						X														X											P,S
SP	Citigroup Inc				X									X									X									P,S
SP	Coca Cola Inc				X									X										X								P,S
SP	Colgate Palmolive Co				X									X										X								S
SP	Danaher Corp				X																X											P
SP	Dell Computer Corp					X															X											P,S
SP	Ebay Inc				X																X											P
SP	Electronic Arts				X												X							X								S
SP	Eli Lilly & Co				X									X								X										P
SP	Fannie Mae Cmn					X								X			X								X							P,S
SP	Franklin Resources Inc				X									X			X							X								S
SP	Genentech Inc				X												X								X							P,S
SP	General Dynamics Corp	X												X									X									S
SP	General Electric Co						X							X											X							S
SP	Gilead Sciences					X															X											P,S
SP	Harley-Davidson Inc				X									X			X						X									P,S
SP	Hartford Financial Srvcs Grp Inc	X												X			X							X								P,S
SP	Hewlett-Packard Inc				X									X								X										P
SP	Intel Corp						X							X								X										P,S
SP	Intl Business Machines Corp	X												X			X							X								S
SP	Johnson & Johnson					X								X			X									X						S
SP	Lockheed Martin Corp	X												X									X									P,S
SP	Lowes Cos Inc					X								X			X							X								P,S
SP	Marsh & McLennan Co Inc	X												X									X									S
SP	Mattel Inc	X												X			X								X							S
SP	Maxim Integrated Products Inc					X								X																		S
SP	McDonalds Corp				X																X											P
SP	Medcohealth Solutions Inc	X															X						X									P,S
SP	Medimmune Inc	X															X								X							S
SP	Medtronic Inc					X								X			X								X							P,S
SP	Merck & Co Inc	X												X										X								P,S
SP	Merrill Lynch Co Inc				X									X			X															P
SP	Microchip Technology Cmn				X									X							X											S
SP	Microsoft Corp						X							X			X									X						P
SP	News Corporation Ltd ADR			X																	X			X								P,S
SP	Nike Class-B Cmn				X									X			X									X						P,S
SP	Nokia Corp ADR				X									X			X															P
SP	Novell Inc				X																X			X								P,S
SP	Oracle Corp					X											X															P,S

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C						BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income						Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excerpted Trust	Qualified Bmd Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Pepsico Inc					X								X		X								X							P,S
SP	Pfizer Inc							X						X		X										X					S
SP	Procter & Gamble Co					X								X									X								P,S
SP	Qualcomm Inc	X												X		X									X						S
SP	Safeco Corp				X									X							X										P
SP	SAP Aktiengesellschaft ADR				X															X											P
SP	Schering Plough Corp	X												X								X									S
SP	St Jude Medical Inc					X														X											P
SP	Starbucks Corp					X										X									X						P,S
SP	Stryker Corp				X											X					X										P,S
SP	Sysco Corp				X									X		X								X							S
SP	Teva Pharmaceutical Ind Ltd ADR				X									X		X										X					P,S
SP	Tribune Co				X									X							X										P
SP	United Parcel Service Inc				X									X								X									S
SP	United Technologies Corp					X								X									X								P,S
SP	Veritas Software Corp					X														X											P,S
SP	Viacom Inc					X								X							X										P,S
SP	Vodafone Grp PLC ADR					X								X								X									P,S
SP	Wal Mart Stores Inc	X												X		X									X						S
SP	Walgreen Co					X								X		X									X						P,S
SP	Wellpoint Health Networks Inc	X														X									X						P,S
SP	Wyeth (FKA Amer Home Prod Corp)					X								X										X							S
SP	Yahoo! Inc					X														X											P
SP	Air Products & Chemicals Inc			X										X							X										P,S
SP	Allstate Corp			X										X							X										P,S
SP	American Express Co			X										X							X										P
SP	Archer Daniels Midland Co			X										X							X										P
SP	AT&T Corp	X														X							X								P,S
SP	Bank of America Corp					X								X								X									P
SP	Bellsouth Corp	X												X		X								X							P,S
SP	Chubb Corp	X														X						X									P,S
SP	Cinergy Corp			X										X							X										P
SP	Citigroup Inc				X									X		X							X								P,S
SP	Comcast Corp				X															X											P
SP	Cox Communications	X														X						X									P,S
SP	Deere & Company	X												X		X									X						P,S
SP	Dow Chemical Co			X										X		X						X									P,S
SP	Eli Lilly & Co	X												X		X						X									P,S
SP	Emerson Electric Co			X										X							X										P
SP	Fannie Mae Cmn				X									X								X									P
SP	Fleet Boston Financial Corp			X										X								X									P
SP	Gannett Co Inc	X														X						X									P,S

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C							BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Guidant Corporation	X												X			X						X									P,S
SP	Hartford Financial Srvcs Grp Inc				X									X								X										P
SP	Hasbro Inc	X															X						X									P,S
SP	HJ Heinz Co	X												X			X							X								P,S
SP	Intel Corp	X															X							X								P,S
SP	International Paper Co			X										X			X						X									P,S
SP	Intl Business Machines Corp			X										X								X										P
SP	Johnson & Johnson				X									X									X									P
SP	Kellogg Co				X									X									X									P
SP	Keyspan Corp			X										X								X										P
SP	Kimberly Clark Corp				X									X									X									P,S
SP	Knight Ridder Inc	X												X			X						X									P,S
SP	Kroger Company	X															X							X								P,S
SP	Lockheed Martin Corp			X																	X											P
SP	Mellon Financial Corp				X									X			X						X									P,S
SP	Merrill Lynch Co Inc			X										X								X										P
SP	Metlife Inc				X									X								X										P
SP	Microsoft Corp	X												X			X						X									P,S
SP	Motorola Inc			X										X			X							X								P,S
SP	National City Corp	X												X			X						X									P,S
SP	Nike Class-B Cmn	X												X			X						X									P,S
SP	Nortel Networks Corp	X															X							X								P,S
SP	Northrop Grumman Corp				X									X								X										P
SP	Novartis AG ADR			X																	X											P
SP	Novellus Systems Inc	X															X						X									P,S
SP	Nstar Cmn	X												X			X							X								P,S
SP	Pfizer Inc				X									X			X						X									P,S
SP	PPG Industries Inc				X									X								X										P
SP	PPL Corporation						X							X								X										P,S
SP	Reed Elsevier PLC ADR			X										X							X											P
SP	Roche Holding AG ADR			X													X						X									P,S
SP	Safeway Inc	X															X							X								P,S
SP	SBC Communications Inc				X									X			X						X									P
SP	Schering-Plough Corp			X										X									X									P
SP	Sears Roebuck & Co			X										X								X										P
SP	St Paul Travelers Companies Inc				X									X									X									P,S
SP	Southtrust Banks Inc	X												X			X						X									P,S
SP	Starwood Hotels & Resorts	X															X						X									P
SP	Suntrust Banks Inc				X									X									X									P,S
SP	Syngenta AG ADR				X									X			X							X								P,S
SP	Texas Instruments Inc	X												X			X															P
SP	Time Warner Inc				X																X											

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C							BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Tribune Co			X													X															
SP	TXU Corp			X										X			X					X										P,S
SP	Union Pacific Corp				X									X			X							X								P,S
SP	Verizon Communications				X									X								X										P
SP	Viacom Inc				X									X									X									P
SP	Wachovia Corp	X												X			X					X										P
SP	FT Wayne Ind Redev 3% 2/1/09							X								X								X								P,S
SP	Garland Tx COPS 4.125% 2/15/16							X																X								P
SP	Lewisville Tx Sch Dist 3.625% 2/15/16							X								X					X											P
SP	Noblesville Ind Redev 4% 7/15/12							X								X									X							P
SP	Oklahoma Dev Fin Auth 4% 7/1/14							X																X								P
SP	St of Ca GO 5% 2/1/17							X								X									X							P
SP	St of NY GO 3.5% 4/15/11							X								X									X							P
SP	Travis Tx GO 4.3% 3/1/18							X													X											P
SP	West Allis W Milwaukee 4% 4/1/13							X								X					X											P
SP	Wstrn Wa Univ 4% 10/1/15							X									X								X							P
SP	Accredited Home Lenders Hldg Co			X													X					X										P,S
SP	Action Performance Cos			X										X			X					X										P,S
SP	Administaff Inc			X													X							X								P,S
SP	Aftermarket Technology Corp			X																	X											P
SP	America Service Group			X																	X											P
SP	American Fin Rlty Tr				X									X									X									P
SP	American Car Mart Inc			X																	X											P
SP	Americredit Corp			X													X						X									P,S
SP	AMN Healthcare Services Inc			X													X						X									P
SP	Anworth Mortgage Asset Corp			X										X								X										P,S
SP	Apria Healthcare Grp			X													X						X									P,S
SP	Bally Total Fitness Hldg Corp			X													X						X									P,S
SP	Beazer Homes USA Inc			X										X			X						X									P,S
SP	Big 5 Sporting Goods Corp			X													X							X								P,S
SP	Capital Automotive REIT			X										X			X						X									P,S
SP	Casual Male Retail Grp Inc			X																	X											P
SP	CATO Corporation			X										X			X						X									P,S
SP	Centene Corporation Chattem Inc			X													X							X								P,S
SP	Charles River Associates Inc	X															X							X								P,S
SP	Chattem Inc			X																	X											P
SP	Coinstar Inc			X													X					X										P,S
SP	Commercial Cap Bancorp Inc			X													X							X								P,S
SP	Copart Inc	X															X						X									P,S
SP	Core Laboratories NV			X													X						X									P,S
SP	Cypress Semiconductor	X															X							X								P,S
SP	Direct General Corp			X										X								X										P

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B											BLOCK C						BLOCK D										
Asset and/or Income Source		Value of Asset											Type of Income						Amount of Income										
		A	B	C	D	E	F	G	H	I	J	K	L						I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
		None	$1 - $1,000	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	$1,000,001 - $5,000,000	$5,000,001 - $25,000,00	$25,000,001 - $50,000,0	Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	None	$1 - $200	$201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	$1,000,001 - $5,000,000	Over $5,000,000	
SP	Dollar Tree Stores Inc	X														X							X								P,S
SP	Excel Technology Inc			X												X					X										P,S
SP	Fidelity Natl Financl Inc			X										X							X										P
SP	Finish Line Inc	X														X							X								P,S
SP	First County Bancorp			X										X							X										P
SP	First State Bancorporation			X										X		X							X								P,S
SP	Franklin Bank Corp			X																X											P
SP	Friedman Billings Ramsey Gro				X									X		X							X								P,S
SP	Genesco Inc			X												X						X									P,S
SP	Global Imaging Services Inc				X											X							X								P,S
SP	Group 1 Automotive Inc			X																X											P
SP	Hanover Capital Mortg Hldgs Inc			X										X		X					X										P,S
SP	Health Care Prpty Inv Inc			X										X		X							X								P,S
SP	Helco Corp			X										X							X										P
SP	Hooker Furniture Corp			X										X		X						X									P,S
SP	Hub Internatl Ltd			X										X							X										P
SP	Inegrated Alarm Services Grp			X																X											P
SP	Integrated Device Technology	X														X						X									P,S
SP	Jarden Corp			X																X											P
SP	Kadant Inc	X														X						X									P,S
SP	Keystone Automotive Inds Inc			X												X						X									P,S
SP	Lithia Motors Inc				X									X		X							X								P,S
SP	Lone Star Steakhouse Saloon	X												X		X						X									P,S
SP	LNR Property Corp			X										X		X						X									P,S
SP	LSI Logic Corp			X												X						X									P,S
SP	Lumiment Mortgage Cap Inc			X																X											P
SP	MDC Holdings Inc			X										X									X								P,S
SP	Marinemax Inc			X												X						X									P,S
SP	Maxwell Shoe Co Inc			X												X						X									P
SP	MCG Capital Corp			X										X									X								P,S
SP	Micrel Inc	X														X															P
SP	Meritage Corporation			X																X											P
SP	MFA Mortgage Investments Inc			X										X																	P
SP	Mobile Mini Inc				X															X											P
SP	Molina Healthcare Inc			X												X						X									P,S
SP	Monro Muffler Brake Inc			X																											P
SP	Movie Gallery Inc			X																											P
SP	NVR Inc			X																											P
SP	Nanometrics Inc			X												X							X								P,S
SP	Nara Bancorp Inc			X										X		X						X									P,S
SP	Nationwide Health Properties Inc	X												X		X							X								P,S
SP	Natl Semiconductor Corp	X														X						X									P,S

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C						BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income						Amount of Income											
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,00	K $25,000,001 - $50,000,0	L Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	
SP	Navigant International Inc			X																X											P
SP	NBTY Inc				X									X						X											P
SP	Newcastle Invt Corp			X													X					X									P
SP	Nextel Partners Inc			X																		X									P
SP	Novastar Financial Inc			X																											P,S
SP	Nu Horizons Electronic Corp			X																X											P
SP	O'Charleys Inc			X																X											P
SP	O'Reilly Automotive			X													X						X								P
SP	Orient-Express Hotels Ltd			X																X											P,S
SP	Pacificare Health Systems Inc			X																X											P
SP	Pericom Semiconductor	X															X			X											P
SP	Plains Expl & Prod Co			X																X		X									P,S
SP	Rainbow Rentals Inc		X																	X											P
SP	RC2 Corp			X													X					X									P
SP	Redwood Trust Inc			X										X									X								P,S
SP	Rehabcare Group Inc			X																X											P
SP	Remedytemp Inc			X													X														P
SP	Rent-A-Center Inc			X																X											P,S
SP	Sanima-Sci Corp	X															X														P,S
SP	Saxon Capital Inc				X												X														P,S
SP	School Specialty Inc			X																X											P,S
SP	Scottish Annty & Life Hldgs Ltd			X																X											P,S
SP	Shaw Group Inc			X																X											P
SP	SM&A Cmn			X																X											P
SP	Sola International Inc			X																X											P
SP	Sonic Automotive Inc			X																X											P
SP	SPSS Inc			X									X								X										P
SP	Sunrise Sr Living Inc			X																X											P,S
SP	Supertex Inc			X												X						X									P,S
SP	Supreme Industries Inc		X													X					X										P,S
SP	TCF Financial Corp			X																X											P
SP	Technology Invstment Cap Corp			X									X								X										P
SP	Thor Industries Inc			X																X											P
SP	Toll Brothers Inc			X									X			X						X									P,S
SP	Transport Corp of America Inc			X												X					X										P,S
SP	US Physical Therapy Inc			X																X											P
SP	United Panam Fincl Corp			X																X											P
SP	United Rentals Inc			X												X							X								P,S
SP	USA Truck Inc			X																X											P
SP	Vitran Corp Inc			X																X											P
SP	Washington Federal Inc			X									X								X										P
SP	Whitehall Jewellers Inc			X																X											P

JANE HARMAN
SCHEDULE III ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

BLOCK A		BLOCK B												BLOCK C							BLOCK D											
Asset and/or Income Source		Value of Asset												Type of Income							Amount of Income											
		A	B	C	D	E	F	G	H	I	J	K	L								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
		None	$1 - $1,000	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	$1,000,001 - $5,000,000	$5,000,001 - $25,000,00	$25,000,001 - $50,000,0	Over $50,000,000	Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income	None	$1 - $200	$201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	$1,000,001 - $5,000,000	Over $5,000,000	
SP	**Winnebago Industries Inc**			X										X			X							X								P,S
SP	**World Accep Corp**			X													X							X								P,S
SP	**Yellow Corp**	X															X						X									P,S

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Goldman Sachs Group Inc 0% 6/5/09 Nikkei Buffered ELN	X			11/28/03				X						
SP	Goldman Sachs Short Duration Govt Mutual Fnd Class I		X		04/10/03					X					
SP	Goldman Sachs Short Duration Govt Mutual Fnd Class I		X		06/11/03					X					
SP	Goldman Sachs Short Duration Govt Mutual Fnd Class I		X		06/26/03					X					
SP	ABN Amro Hlds NV	X			05/07/03	X									
SP	Australia & New Zealand Bkg Grp Ltd	X			08/01/03	X									
SP	Australia & New Zealand Bkg Grp Ltd	X			08/04/03	X									
SP	Aventis Spons ADR	X			01/03/03		X								
SP	Aventis Spons ADR	X			01/10/03		X								
SP	Aventis Spons ADR	X			02/05/03		X								
SP	Aventis Spons ADR	X			02/10/03	X									
SP	Aventis Spons ADR	X			03/27/03	X									
SP	Aventis Spons ADR	X			03/28/03	X									
SP	Aventis Spons ADR	X			07/30/03	X									
SP	BAA PLC Spons ADR	X			11/06/03		X								
SP	BAA PLC Spons ADR	X			12/18/03	X									
SP	Bank Fukuoka Ltd ADR	X			09/16/03		X								
SP	Bank Fukuoka Ltd ADR	X			12/22/03	X									
SP	Bank of East Asia Ltd	X			03/19/03	X									
SP	Bank of East Asia Ltd	X			03/31/03	X									
SP	Bank of East Asia Ltd	X			06/05/03	X									
SP	Bank of Ireland Spon ADR	X			07/24/03	X									
SP	Bank of Ireland Spon ADR	X			07/31/03	X									
SP	Bank of Ireland Spon ADR	X			09/08/03	X									
SP	BOC Grp PLC Spon ADR	X			11/04/03	X									
SP	BT Group PLC ADR	X			06/12/03		X								
SP	BT Group PLC ADR	X			07/09/03	X									
SP	BT Group PLC ADR	X			07/10/03	X									
SP	Buezl PLC Spons ADR+B175	X			12/18/03	X									
SP	Canon Inc ADR	X			12/18/03	X									
SP	Centrica PLC Spons ADR	X			01/31/03	X									
SP	Centrica PLC Spons ADR	X			02/28/03	X									
SP	Danske BK A/S ADR	X			11/07/03		X								
SP	DBS Group Holdings Spon ADR	X			06/02/03		X								
SP	Deutsche Bank AG	X			03/04/03	X									
SP	Deutsche Bank AG	X			08/26/03	X									
SP	Deutsche Bank AG	X			08/29/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transactions									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	E.ON AG Spons ADR	X			04/01/03	X									
SP	E.ON AG Spons ADR	X			07/14/03	X									
SP	Eisai Co Ltd Spons ADR	X			05/15/03	X									
SP	Eisai Co Ltd Spons ADR	X			07/08/03	X									
SP	ENI SPA Spon ADR	X			09/02/03	X									
SP	ENI SPA Spon ADR	X			09/15/03	X									
SP	Fortis (NL) NV Spon ADR	X			09/24/03	X									
SP	Fortis (NL) NV Spon ADR	X			12/11/03	X									
SP	Fortis (NL) NV Spon ADR	X			03/04/03	X									
SP	Fuji Heavy Ind Ltd ADR	X			02/03/03	X									
SP	Fuji Heavy Ind Ltd ADR	X			09/08/03		X								
SP	Fuji Photo ADR New	X			07/14/03		X								
SP	Fuji Photo ADR New	X			08/07/03		X								
SP	Fuji Photo ADR New	X			09/24/03	X									
SP	Fuji Photo ADR New	X			10/07/03	X									
SP	Hachijuni Bank Ltd ADR	X			09/17/03		X								
SP	Hellenic Telecom Organ SA	X			03/27/03	X									
SP	Hellenic Telecom Organ SA	X			03/31/03	X									
SP	Hellenic Telecom Organ SA	X			04/02/03	X									
SP	Honda Mtr Ltd (Amer Shs) ADR	X			01/27/03	X									
SP	Honda Mtr Ltd (Amer Shs) ADR	X			09/24/03	X									
SP	Honda Mtr Ltd (Amer Shs) ADR	X			11/04/03	X									
SP	J Sainsbury PLC Spon ADR	X			01/07/03		X								
SP	J Sainsbury PLC Spon ADR	X			03/21/03	X									
SP	J Sainsbury PLC Spon ADR	X			07/24/03	X									
SP	KAO Corp ADR	X			05/23/03	X									
SP	Korea Electric Power CRP ADR	X			01/24/03		X								
SP	Lloyds TSB Group PLC Spons ADR	X			09/22/03		X								
SP	Marks & Spencer PLC Spons ADR	X			06/25/03		X								
SP	Marks & Spencer PLC Spons ADR	X			09/02/03	X									
SP	Marks & Spencer PLC Spons ADR	X			09/15/03	X									
SP	Marks & Spencer PLC Spons ADR	X			11/04/03	X									
SP	Matsushita Elec Indl ADR	X			05/21/03		X								
SP	Minebea Co Ltd Spon ADR	X			03/27/03	X									
SP	Minebea Co Ltd Spon ADR	X			03/31/03	X									
SP	Minebea Co Ltd Spon ADR	X			12/19/03		X								
SP	Natl Australia Bank LTD Spon ADR	X			10/14/03		X								

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Natl Australia Bank LTD Spon ADR	X			11/04/03	X									
SP	Natl Australia Bank LTD Spon ADR	X			12/03/03	X									
SP	Nedcor Ltd Spons ADR	X			08/27/03	X									
SP	Nedcor Ltd Spons ADR	X			08/28/03		X								
SP	Nestle SA Spons ADR	X			01/24/03	X									
SP	Nestle SA Spons ADR	X			01/31/03	X									
SP	Nestle SA Spons ADR	X			03/28/03	X									
SP	Nestle SA Spons ADR	X			05/16/03	X									
SP	Nippon Teleg & Tel Spon ADR	X			09/07/03	X									
SP	Novartis AG-ADR Spon ADR	X			01/07/03	X									
SP	Novartis AG-ADR Spon ADR	X			03/17/03	X									
SP	Pernod Ricard ADR	X			01/27/03	X									
SP	Rexam PLC ADR	X			07/07/03	X									
SP	Rexam PLC ADR	X			07/31/03	X									
SP	Roche Holdings AG ADR	X			02/28/03	X									
SP	Sekisui Homes Ltd Spons ADR	X			09/08/03	X									
SP	Shiseido Co Ltd Spon ADR	X			09/08/03		X								
SP	Sun Hung Kai Prop Ltd Spon ADR	X			06/09/03		X								
SP	Sun Hung Kai Prop Ltd Spon ADR	X			07/25/03	X									
SP	Telecom Italia SPA Spon ADR	X			01/08/03		X								
SP	Telecom Italia SPA Spon ADR	X			03/06/03	X									
SP	Telefonos De Mexico SA Spons ADR	X			01/24/03	X									
SP	Thomson SA Spon ADR	X			03/04/03	X									
SP	Thomson SA Spon ADR	X			03/07/03	X									
SP	Thomson SA Spon ADR	X			03/31/03	X									
SP	Thomson SA Spon ADR	X			04/01/03	X									
SP	Thomson SA Spon ADR	X			07/15/03	X									
SP	Toyota Motor Corp Spon ADR	X			04/16/03		X								
SP	Toyota Motor Corp Spon ADR	X			04/24/03	X									
SP	Toyota Motor Corp Spon ADR	X			05/08/03	X									
SP	Toyota Motor Corp Spon ADR	X			10/07/03	X									
SP	United Microelectronics Corpo Spon ADR	X			12/23/03	X									
SP	United Microelectronics Corpo Spon ADR	X			03/04/03	X									
SP	UPM-Kymmene Corp Spon ADR	X			05/30/03	X									
SP	UPM-Kymmene Corp Spon ADR	X			06/27/03		X								
SP	Volkswagon AG Spon ADR	X			04/22/03	X									
SP	Volkswagon AG Spon ADR	X			07/24/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Wolters Kluwer Spon ADR	X			06/03/03	X									
SP	Wolters Kluwer Spon ADR	X			07/24/03	X									
SP	Zurich Financial Services Spon ADR	X			09/11/03		X								
SP	Zurich Financial Services Spon ADR	X			09/15/03	X									
SP	Zurich Financial Services Spon ADR	X			09/24/03	X									
SP	Zurich Financial Services Spon ADR	X			12/23/03	X									
SP	ABN Amro Hlds NV		X		03/20/03	X									
SP	ABN Amro Hlds NV		X		06/02/03	X									
SP	ABN Amro Hlds NV		X		09/17/03	X									
SP	Allied Domecq PLC Spon ADR		X		01/08/03		X								
SP	Allied Domecq PLC Spon ADR		X		06/20/03		X								
SP	Australia & New Zealand Bkg Grp Ltd		X		01/31/03	X									
SP	Australia & New Zealand Bkg Grp Ltd		X		05/22/03	X									
SP	Australia & New Zealand Bkg Grp Ltd		X		06/12/03		X								
SP	Australia & New Zealand Bkg Grp Ltd		X		10/09/03	X									
SP	Australia & New Zealand Bkg Grp Ltd		X		10/16/03		X								
SP	Australia & New Zealand Bkg Grp Ltd		X		10/20/03	X									
SP	Autoliv Inc		X		02/05/03	X									
SP	Autoliv Inc		X		03/28/03	X									
SP	Autoliv Inc		X		10/15/03		X								
SP	Aventis Spons ADR		X		10/08/03	X									
SP	BAE Systems PLC Spon ADR		X		10/09/03	X									
SP	Bank of East Asia Ltd		X		09/24/03	X									
SP	Bank of East Asia Ltd		X		11/03/03	X									
SP	Bank of East Asia Ltd		X		11/04/03	X									
SP	Bank of East Asia Ltd		X		12/03/03	X									
SP	Bank of Ireland Spon ADR		X		02/27/03		X								
SP	Bank of Ireland Spon ADR		X		02/28/03	X									
SP	Bank of Ireland Spon ADR		X		03/04/03	X									
SP	Bank of Ireland Spon ADR		X		05/22/03	X									
SP	Barclays PLC ADS ADR		X		09/24/03		X								
SP	Bayer AG Spon ADR		X		02/26/03	X									
SP	Bayer AG Spon ADR		X		02/27/03	X									
SP	Bayer AG Spon ADR		X		03/05/03	X									
SP	BNP Paribas Spon ADR		X		02/11/03	X									
SP	Buhrmann NV Spon ADR		X		08/11/03	X									
SP	Bunzl PLC Spons ADR		X		04/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Cadbury Schweppes PLC ADR		X		06/20/03		X								
SP	Canon Inc ADR		X		05/05/03	X									
SP	Canon Inc ADR		X		06/11/03	X									
SP	Canon Inc ADR		X		06/17/03		X								
SP	Canon Inc ADR		X		09/24/03	X									
SP	China Mobile Hong Kong Ltd Spon ADR		X		09/24/03	X									
SP	Creative Technology Ltd		X		06/24/03	X									
SP	Creative Technology Ltd		X		10/13/03		X								
SP	DBS Group Holdings Spon ADR		X		08/26/03	X									
SP	DBS Group Holdings Spon ADR		X		11/04/03		X								
SP	Deutsche Bank AG		X		03/19/03	X									
SP	Deutsche Bank AG		X		06/02/03	X									
SP	Deutsche Bank AG		X		12/08/03	X									
SP	Deutsche Bank AG		X		12/22/03	X									
SP	E.ON AG Spons ADR		X		05/16/03	X									
SP	E.ON AG Spons ADR		X		12/29/03	X									
SP	EDP-Electricidade De Portugal Spon ADR		X		09/16/03	X									
SP	EDP-Electricidade De Portugal Spon ADR		X		09/16/03	X									
SP	Eisai Co Ltd Spons ADR		X		09/24/03		X								
SP	Eisai Co Ltd Spons ADR		X		11/20/03		X								
SP	Endesa SA ADS		X		05/16/03	X									
SP	Endesa SA ADR		X		09/16/03	X									
SP	Endesa SA ADR+B202		X		12/23/03	X									
SP	ENI SPA Spon ADR		X		01/07/03	X									
SP	Fortis (NL) NV Spon ADR		X		01/08/03	X									
SP	Hellenic Telecom Organ SA		X		12/22/03	X									
SP	Hellenic Telecom Organ SA		X		12/23/03	X									
SP	Honda Mtr Ltd (Amer Shs) ADR		X		02/07/03	X									
SP	Hunter Douglas NV		X		01/17/03	X									
SP	Hunter Douglas NV		X		01/21/03	X									
SP	Hunter Douglas NV		X		01/22/03	X									
SP	Hunter Douglas NV		X		01/23/03	X									
SP	J Sainsbury PLC Spon ADR		X		11/20/03		X								
SP	Konami Co Ltd Spon ADR		X		09/29/03	X									
SP	Konami Co Ltd Spon ADR		X		10/06/03		X								
SP	Konami Co Ltd Spon ADR		X		10/14/03	X									
SP	Konami Co Ltd Spon ADR		X		10/14/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

	Asset	Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Koninklijke Ahold NV Spon ADR		X		03/07/03	X									
SP	Koninklijke Ahold NV Spon ADR		X		03/10/03	X									
SP	Koninklijke Ahold NV Spon ADR		X		03/10/03	X									
SP	Koninklijke Philips Electrs NV ADR		X		12/23/03	X									
SP	Korea Electric Power CRP ADR		X		09/24/03	X									
SP	Matsushita Elec Indl ADR		X		07/16/03	X									
SP	Matsushita Elec Indl ADR		X		07/16/03		X								
SP	Nippon Teleg & Tel Spon ADR		X		09/22/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		02/07/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		04/22/03		X								
SP	Nissan Motor Co Ltd Spon ADR		X		05/08/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		06/02/03		X								
SP	Nokia Corp Spon ADR		X		06/02/03	X									
SP	Pernod Ricard ADR		X		02/28/03			X							
SP	Petrochina Co Ltd Spon ADR		X		01/14/03	X									
SP	Petroleo Brasileiro SA Spon ADR		X		01/14/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		02/05/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		05/22/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		10/03/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		11/17/03	X									
SP	Roche Holdings AG ADR		X		06/05/03	X									
SP	Roche Holdings AG ADR		X		06/18/03	X									
SP	Roche Holdings AG ADR		X		08/26/03	X									
SP	Roche Holdings AG ADR		X		10/06/03	X									
SP	Roche Holdings AG ADR		X		10/10/03	X									
SP	Roche Holdings AG ADR		X		10/21/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		03/04/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		10/09/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		10/09/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		11/04/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		12/02/03	X									
SP	Santos Ltd Spon ADR		X		02/05/03	X									
SP	Santos Ltd Spon ADR		X		12/19/03	X									
SP	Sekisui Homes Ltd Spons ADR		X		04/21/03	X									
SP	Sekisui Homes Ltd Spons ADR		X		08/26/03	X									
SP	Shell Trns & Trading PLC NY Shs		X		01/14/03		X								
SP	Statoil ASA Spon ADR		X		02/28/03		X								

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN 1987 REVOCABLE TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Sun Hung Kai Prop Ltd Spon ADR		X		09/24/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR		X		11/03/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR		X		11/04/03	X									
SP	Swire Pacific Ltd Spon ADR		X		02/07/03	X									
SP	Swire Pacific Ltd Spon ADR		X		02/11/03	X									
SP	Swire Pacific Ltd Spon ADR		X		09/15/03	X									
SP	TDK Corp of New Zealand		X		09/22/03	X									
SP	Telecom Corp of New Zealand ADS		X		02/05/03	X									
SP	Telecom Corp of New Zealand ADS		X		05/23/03	X									
SP	Telecom Corp of New Zealand ADS		X		09/25/03	X									
SP	Telecom Italia SPA Spon ADR		X		04/15/03	X									
SP	Telecom Italia SPA Spon ADR		X		05/29/03	X									
SP	Telecom Italia SPA Spon ADR		X		06/06/03	X									
SP	Telecomunicacoes Brasileiras SA ADR		X		06/02/03	X									
SP	Telecomunicacoes Brasileiras SA ADR		X		11/04/03	X									
SP	Thomson SA Spon ADR		X		06/05/03	X									
SP	Thomson SA Spon ADR		X		12/02/03	X									
SP	Toyota Motor Corp Spon ADR		X		12/23/03	X									
SP	UBS AG CMN Isin		X		05/22/03	X									
SP	Unilever PLC Spon ADR		X		01/03/03	X									
SP	Unilever PLC Spon ADR		X		01/07/03	X									
SP	United Microelectronics Corpo Spon ADR		X		11/03/03		X								
SP	Volkswagon AG Spon ADR		X		12/18/03		X								
SP	US Notes (Treasury Inflation Indexed)		X		03/03/03								X		

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

	Asset	Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Pan Capital LLC		X		12/31/03							X			
SP	AB Svensk Eksportkredit 1/31/06	X			01/17/03						X				
SP	AB Svensk Eksportkredit MTN 7/15/05	X			06/10/06							X			
SP	AB Svensk Eksportkredit 1/31/06		X		03/04/03							X			
SP	Goldman Sachs Shrt Duration Govt Mutual Fund Class I		X		04/22/03		X								
SP	Goldman Sachs Core Fixed Inc A		X		04/22/03					X					
SP	Goldman Sachs Core Fixed Inc A		X		06/17/03							X			
SP	Goldman Sachs Shrt Duration Govt Mutual Fund Class I		X		07/18/03	X									
SP	Goldman Sachs High Yield A Mutual Fund Class A		X		07/18/03					X					
SP	Goldman Sachs Growth Opportunities Class A		X		09/24/03						X				
SP	Abbott Laboratories	X			05/28/03	X									
SP	Abbott Laboratories	X			05/29/03	X									
SP	Abbott Laboratories	X			06/02/03	X									
SP	Abbott Laboratories	X			06/16/03	X									
SP	Air Products & Chemicals Inc	X			01/07/03	X									
SP	Air Products & Chemicals Inc (5 Transactions)	X			1/29 -2/3/03	X									
SP	Air Products & Chemicals Inc	X			03/10/03	X									
SP	Allstate Corp	X			06/09/03	X									
SP	American Express Co	X			08/12/03	X									
SP	American Express Co	X			08/13/03	X									
SP	American Express Co	X			08/14/03	X									
SP	American Express Co	X			09/15/03	X									
SP	Archer Daniels Midland Co	X			07/22/03	X									
SP	Archer Daniels Midland Co	X			07/23/03	X									
SP	AT&T Corp	X			01/14/03	X									
SP	AT&T Corp	X			01/21/03	X									
SP	AT&T Corp	X			01/22/03	X									
SP	Automatic Data Processing Inc	X			01/24/03	X									
SP	Bank of America Corp	X			07/30/03	X									
SP	Bank of America Corp	X			09/11/03	X									
SP	Bellsouth Corp	X			01/23/03	X									
SP	Bellsouth Corp	X			03/03/03	X									
SP	Bellsouth Corp	X			03/04/03	X									
SP	Bowater Inc	X			04/07/03	X									
SP	Bowater Inc	X			04/08/03	X									
SP	Bowater Inc	X			04/09/03	X									
SP	Bowater Inc	X			04/10/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Cinergy Corp (8 Transactions)	X			10/7 - 11/7/03	X									
SP	Cinergy Corp	X			11/06/03	X									
SP	Cinergy Corp	X			12/16/03	X									
SP	Comcast Corporation	X			09/10/03	X									
SP	Comcast Corporation	X			09/11/03	X									
SP	Comcast Corporation	X			09/12/03	X									
SP	Comcast Corporation	X			09/16/03	X									
SP	Comcast Corporation	X			09/17/03	X									
SP	Comcast Corporation	X			09/18/03	X									
SP	Comcast Corporation	X			09/30/03	X									
SP	Comcast Corporation	X			10/07/03	X									
SP	Comcast Corporation	X			12/04/03	X									
SP	Cox Communications Cl A (12 Transactions)	X			5/23 - 6/19/03	X									
SP	Cox Communications Cl A	X			05/28/03	X									
SP	Cox Communications Cl A	X			06/24/03	X									
SP	Cox Communications Cl A	X			07/15/03	X									
SP	Cox Communications Cl A	X			08/13/03	X									
SP	Deer & Co	X			03/31/03	X									
SP	Dow Chemical Co	X			01/07/03	X									
SP	Dow Chemical Co (3 Transactions)	X			1/8 - 1/22/03	X									
SP	Dow Chemical Co	X			01/10/03	X									
SP	Dow Chemical Co	X			02/05/03	X									
SP	Dow Chemical Co	X			02/25/03	X									
SP	Emerson Electric Co	X			05/19/03	X									
SP	Emerson Electric Co	X			05/20/03	X									
SP	Emerson Electric Co	X			05/27/03	X									
SP	Emerson Electric Co	X			05/28/03	X									
SP	Emerson Electric Co	X			05/29/03	X									
SP	Emerson Electric Co	X			06/02/03	X									
SP	Emerson Electric Co	X			07/30/03	X									
SP	Emerson Electric Co	X			10/20/03	X									
SP	Emerson Electric Co	X			10/22/03	X									
SP	Emerson Electric Co	X			10/23/03	X									
SP	Emerson Electric Co	X			10/24/03	X									
SP	Exelon Corp	X			12/24/03	X									
SP	Exelon Corp	X			12/29/03	X									
SP	Fannie Mae Com Stk	X			03/14/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Fannie Mae Com Stk	X			03/17/03	X									
SP	Fannie Mae Com Stk	X			03/19/03	X									
SP	Fannie Mae Com Stk	X			06/11/03	X									
SP	Fleet Boston Financial Corp	X			06/17/03	X									
SP	Fleet Boston Financial Corp	X			06/18/03	X									
SP	Fleet Boston Financial Corp	X			07/22/03	X									
SP	Fleet Boston Financial Corp	X			07/30/03	X									
SP	Gannett Co	X			04/07/03	X									
SP	Guidant Corp (5 Transactions)	X			6/16 - 6/20/03	X									
SP	Guidant Corp	X			06/24/03	X									
SP	HJ Heinz Co	X			03/14/03	X									
SP	HJ Heinz Co (4 Transactions)	X			3/24 - 9/22/03	X									
SP	HJ Heinz Co	X			09/23/03	X									
SP	Hartford Financial Srvcs Grp	X			06/09/03	X									
SP	Hartford Financial Srvcs Grp	X			06/10/03	X									
SP	Hartford Financial Srvcs Grp	X			12/29/03	X									
SP	Hasbro Inc (9 Transactions)	X			7/22 - 9/30/03	X									
SP	Home Depot Inc	X			01/03/03	X									
SP	Home Depot Inc	X			01/06/03	X									
SP	Home Depot Inc	X			01/07/03	X									
SP	Intl Business Machines Corp	X			06/16/03	X									
SP	Intl Business Machines Corp	X			08/12/03	X									
SP	Intl Business Machines Corp	X			08/19/03	X									
SP	Johnson & Johnson	X			09/11/03	X									
SP	Johnson & Johnson	X			09/18/03	X									
SP	Johnson & Johnson	X			10/14/03	X									
SP	Johnson & Johnson	X			10/17/03	X									
SP	Johnson & Johnson	X			10/28/03	X									
SP	Johnson & Johnson	X			11/06/03	X									
SP	Kellogg Company	X			03/03/03	X									
SP	Kellogg Company	X			03/04/03	X									
SP	Kellogg Company	X			05/27/03	X									
SP	Kimberly Clark Corp	X			04/24/03	X									
SP	Kimberly Clark Corp	X			05/27/03	X									
SP	Kimberly Clark Corp	X			05/28/03	X									
SP	Kimberly Clark Corp	X			07/23/03	X									
SP	Kimberly Clark Corp	X			07/24/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Kimberly Clark Corp	X			08/04/03	X									
SP	Kimberly Clark Corp	X			08/25/03	X									
SP	Kimberly Clark Corp	X			11/28/03	X									
SP	Knight Ridder Inc	X			08/13/03	X									
SP	Kroger Company (4 Transactions)	X			5/27 - 5/30/03	X									
SP	Lockheed Martin Corp	X			12/01/03	X									
SP	Lockheed Martin Corp	X			12/09/03	X									
SP	Lockheed Martin Corp	X			12/22/03	X									
SP	Mellon Financial Corp	X			02/13/03	X									
SP	Mellon Financial Corp	X			02/19/03	X									
SP	Mellon Financial Corp	X			03/27/03	X									
SP	Mellon Financial Corp	X			03/31/03	X									
SP	Mellon Financial Corp	X			04/01/03	X									
SP	Mellon Financial Corp	X			06/19/03	X									
SP	Merrill Lynch Co Inc	X			07/22/03	X									
SP	Metlife Inc	X			04/07/03	X									
SP	Metlife Inc (4 Transactions)	X			8/25 - 9/24/03	X									
SP	Metlife Inc	X			08/26/03	X									
SP	Microsoft Corp	X			03/12/03	X									
SP	Microsoft Corp	X			03/27/03	X									
SP	Microsoft Corp	X			03/28/03	X									
SP	Microsoft Corp	X			03/31/03	X									
SP	Microsoft Corp	X			04/07/03	X									
SP	Motorola Inc	X			02/10/03	X									
SP	Motorola Inc	X			02/13/03	X									
SP	Motorola Inc	X			02/14/03	X									
SP	Motorola Inc	X			02/19/03	X									
SP	Motorola Inc (6 Transactions)	X			2/21 - 4/29/03	X									
SP	Motorola Inc	X			03/03/03	X									
SP	National Fuel Gas Co	X			01/22/03	X									
SP	National Fuel Gas Co	X			01/24/03	X									
SP	National Fuel Gas Co	X			01/24/03	X									
SP	National Fuel Gas Co	X			01/28/03	X									
SP	National Fuel Gas Co	X			01/29/03	X									
SP	Nortel Networks Corp	X			07/29/03	X									
SP	Nortel Networks Corp	X			07/30/03	X									
SP	Nortel Networks Corp	X			08/25/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Northrop Grumman Corp	X			02/10/03	X									
SP	Northrop Grumman Corp	X			03/24/03	X									
SP	Northrop Grumman Corp	X			04/08/03	X									
SP	Northrop Grumman Corp	X			10/06/03	X									
SP	Northrop Grumman Corp	X			10/17/03	X									
SP	Northrop Grumman Corp	X			10/22/03	X									
SP	Northrop Grumman Corp	X			12/19/03	X									
SP	Novartis AG-ADR	X			02/04/03	X									
SP	Novartis AG-ADR	X			02/05/03	X									
SP	Novartis AG-ADR	X			02/10/03	X									
SP	Novartis AG-ADR	X			02/25/03	X									
SP	Novartis AG-ADR	X			03/04/03	X									
SP	Novartis AG-ADR	X			05/12/03	X									
SP	Novellus Systems Inc	X			05/27/03	X									
SP	Novellus Systems Inc	X			05/28/03	X									
SP	Pepsico Inc	X			05/27/03	X									
SP	PPG Industries Inc	X			06/24/03	X									
SP	PPL Corporation (11 Transactions)	X			6/6 - 9/2/03	X									
SP	PPL Corporation	X			06/18/03	X									
SP	PPL Corporation	X			06/24/03	X									
SP	PPL Corporation	X			08/26/03	X									
SP	PPL Corporation	X			11/05/03	X									
SP	Roche Holding AG ADR	X			08/13/03	X									
SP	Roche Holding AG ADR	X			08/15/03	X									
SP	Roche Holding AG ADR	X			09/16/03	X									
SP	Safeway Inc	X			02/03/03	X									
SP	SBC Communications Inc	X			03/24/03	X									
SP	SBC Communications Inc	X			05/12/03	X									
SP	SBC Communications Inc	X			10/21/03	X									
SP	SBC Communications Inc	X			10/22/03	X									
SP	SBC Communications Inc	X			10/24/03	X									
SP	SBC Communications Inc	X			11/05/03	X									
SP	SBC Communications Inc	X			11/11/03	X									
SP	SBC Communications Inc	X			11/19/03	X									
SP	Schering-Plough Corp	X			03/28/03	X									
SP	Schering Plough Corp	X			03/31/03	X									
SP	Schering-Plough Corp	X			04/01/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Schering-Plough Corp	X			04/03/03	X									
SP	Schering-Plough Corp	X			04/04/03	X									
SP	Schering-Plough Corp	X			04/14/03	X									
SP	Schering-Plough Corp (14 Transactions)	X			4/15 - 7/18/03	X									
SP	Schering-Plough Corp	X			04/25/03	X									
SP	Schering-Plough Corp	X			04/28/03	X									
SP	Schering-Plough Corp	X			07/22/03	X									
SP	Sears Roebuck & Co	X			07/17/03	X									
SP	Sears Roebuck & Co	X			07/18/03	X									
SP	Sears Roebuck & Co	X			07/22/03	X									
SP	Sears Roebuck & Co	X			09/11/03	X									
SP	Starwood Hotels & Resorts WW Inc (5 Transactions)	X			5/13 - 6/24/03	X									
SP	Starwood Hotels & Resorts WW Inc	X			05/14/03	X									
SP	Starwood Hotels & Resorts WW Inc	X			05/16/03	X									
SP	Suntrust Banks Inc	X			01/07/03	X									
SP	Suntrust Banks Inc	X			05/19/03	X									
SP	Suntrust Banks Inc (4 Transactions)	X			6/10 - 10/22/03	X									
SP	Suntrust Banks Inc	X			06/24/03	X									
SP	Suntrust Banks Inc	X			09/03/03	X									
SP	Suntrust Banks Inc	X			10/24/03	X									
SP	Syngenta AG Spon ADR	X			10/29/03	X									
SP	Texas Instruments Inc	X			12/03/03	X									
SP	Texas Instruments Inc	X			03/11/03	X									
SP	Texas Instruments Inc	X			03/12/03	X									
SP	Time Warner Inc	X			10/29/03	X									
SP	Time Warner Inc	X			11/05/03	X									
SP	Time Warner Inc	X			12/04/03	X									
SP	St Pauls Travelers Co	X			01/24/03	X									
SP	St Pauls Travelers Co	X			02/04/03	X									
SP	St Pauls Travelers Co	X			02/05/03	X									
SP	St Pauls Travelers Co (22 Transactions)	X			2/6 - 10/8/03	X									
SP	St Pauls Travelers Co	X			10/07/03	X									
SP	St Pauls Travelers Co	X			12/22/03	X									
SP	Tribune Co	X			03/03/03	X									
SP	Tribune Co	X			06/10/03	X									
SP	Tribune Co	X			08/13/03	X									
SP	TXU Corp (13 Transactions)	X			2/27 - 9/23/03	X									

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SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	TXU Corp	X			02/28/03	X									
SP	TXU Corp	X			03/04/03	X									
SP	TXU Corp	X			09/24/03	X									
SP	Union Pacific Corp	X			03/24/03	X									
SP	Union Pacific Corp	X			03/25/03	X									
SP	Union Pacific Corp	X			06/10/03	X									
SP	Union Pacific Corp	X			07/30/03	X									
SP	Union Pacific Corp	X			08/12/03	X									
SP	Union Pacific Corp	X			11/18/03	X									
SP	Union Pacific Corp	X			12/02/03	X									
SP	Verizon Communications	X			01/13/03	X									
SP	Verizon Communications	X			01/14/03	X									
SP	Verizon Communications	X			01/15/03	X									
SP	Verizon Communications	X			01/16/03	X									
SP	Verizon Communications	X			01/21/03	X									
SP	Verizon Communications	X			08/13/03	X									
SP	Verizon Communications	X			09/03/03	X									
SP	Verizon Communications	X			09/23/03	X									
SP	Verizon Communications	X			09/24/03	X									
SP	Verizon Communications	X			10/07/03	X									
SP	Verizon Communications	X			10/27/03	X									
SP	Verizon Communications	X			10/28/03	X									
SP	Verizon Communications	X			11/17/03	X									
SP	Viacom Inc	X			08/13/03	X									
SP	Viacom Inc	X			09/15/03	X									
SP	3M Co		X		02/25/03	X									
SP	3M Co		X		03/31/03	X									
SP	3M Co		X		04/08/03	X									
SP	Abbott Laboratories		X		01/02/03	X									
SP	Abbott Laboratories		X		01/15/03	X									
SP	Abbott Laboratories		X		03/13/03	X									
SP	Abbott Laboratories (6 Transactions)		X		8/12 - 8/26/03	X									
SP	Abbott Laboratories		X		08/14/03	X									
SP	Abbott Laboratories		X		08/15/03	X									
SP	Air Products & Chemicals Inc		X		06/24/03	X									
SP	Allstate Corp		X		01/27/03	X									
SP	Allstate Corp		X		08/13/03	X									

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SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Allstate Corp		X		12/30/03		X								
SP	American Express Co		X		03/05/03	X									
SP	American Express Co		X		03/26/03	X									
SP	American Express Co		X		03/27/03	X									
SP	American Express Co		X		03/28/03	X									
SP	American Express Co		X		04/01/03	X									
SP	Analog Devices Inc		X		04/07/03	X									
SP	Analog Devices Inc		X		04/08/03	X									
SP	Analog Devices Inc		X		04/15/03	X									
SP	Analog Devices Inc		X		04/16/03	X									
SP	Analog Devices Inc		X		04/22/03	X									
SP	Apache Corp		X		01/07/03	X									
SP	Apache Corp		X		01/14/03	X									
SP	Apache Corp		X		01/27/03	X									
SP	Apache Corp		X		01/28/03	X									
SP	Apache Corp		X		01/29/03	X									
SP	AT&T Corp		X		02/27/03	X									
SP	AT&T Corp		X		04/28/03	X									
SP	AT&T Corp		X		04/29/03	X									
SP	AT&T Corp		X		05/16/03	X									
SP	AT&T Corp		X		05/23/03	X									
SP	AT&T Corp		X		05/27/03	X									
SP	AT&T Corp		X		05/30/03	X									
SP	AT&T Corp		X		06/04/03	X									
SP	AT&T Corp		X		06/11/03	X									
SP	Automatic Data Processing Inc		X		03/13/03	X									
SP	Bank of America Corp		X		01/24/03	X									
SP	Bank of America Corp		X		02/10/03	X									
SP	Bank of America Corp		X		02/25/03	X									
SP	Bellsouth Corp		X		06/24/03	X									
SP	Bellsouth Corp		X		08/13/03	X									
SP	Bellsouth Corp		X		09/23/03	X									
SP	Bellsouth Corp		X		09/24/03	X									
SP	Bellsouth Corp		X		09/25/03	X									
SP	Bellsouth Corp		X		10/07/03	X									
SP	Bellsouth Corp		X		11/11/03	X									
SP	Bellsouth Corp		X		11/19/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Bowater Inc		X		07/29/03	X									
SP	Bowater Inc		X		07/30/03	X									
SP	Bowater Inc		X		07/31/03	X									
SP	Canadian National Railway Co		X		02/28/03	X									
SP	Canadian National Railway Co		X		03/24/03	X									
SP	Canadian National Railway Co		X		03/25/03	X									
SP	Canadian National Railway Co		X		03/26/03	X									
SP	Canadian National Railway Co		X		03/27/03	X									
SP	Canadian National Railway Co		X		03/28/03	X									
SP	Canadian National Railway Co		X		03/31/03	X									
SP	Caterpillar Inc		X		03/24/03	X									
SP	Caterpillar Inc		X		03/25/03	X									
SP	Caterpillar Inc		X		03/31/03	X									
SP	Caterpillar Inc		X		04/01/03	X									
SP	Caterpillar Inc		X		04/07/03	X									
SP	Caterpillar Inc		X		04/14/03	X									
SP	Caterpillar Inc		X		05/27/03	X									
SP	Caterpillar Inc		X		05/28/03	X									
SP	Caterpillar Inc		X		05/29/03	X									
SP	Chubb Corp		X		03/28/03	X									
SP	Chubb Corp		X		06/06/03	X									
SP	Chubb Corp		X		06/10/03	X									
SP	Chubb Corp		X		06/11/03	X									
SP	Citicorp Inc		X		04/07/03	X									
SP	Citicorp Inc		X		05/09/03	X									
SP	Citicorp Inc		X		05/12/03	X									
SP	Citicorp Inc		X		10/20/03	X									
SP	Citicorp Inc		X		10/21/03	X									
SP	Citicorp Inc		X		10/23/03	X									
SP	Cox Communications Cl A		X		12/11/03	X									
SP	Deer & Company		X		04/28/03	X									
SP	Deer & Company		X		05/12/03	X									
SP	Deer & Company		X		08/19/03	X									
SP	Deer & Company		X		09/11/03	X									
SP	Deer & Company		X		10/06/03	X									
SP	Deer & Company		X		10/22/03	X									
SP	Deer & Company		X		10/28/03	X									

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SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Deer & Company		X		11/18/03	X									
SP	Deer & Company		X		11/28/03	X									
SP	Disney Walt Co		X		05/22/03	X									
SP	Disney Walt Co		X		05/23/03	X									
SP	Disney Walt Co		X		05/27/03	X									
SP	Dow Chemical Co		X		05/19/03	X									
SP	Dow Chemical Co		X		05/20/03	X									
SP	Eastman Kodak Co		X		01/14/03	X									
SP	Eastman Kodak Co		X		01/15/03	X									
SP	Eastman Kodak Co		X		01/16/03	X									
SP	Eli Lilly & Co		X		03/14/03	X									
SP	Eli Lilly & Co		X		03/17/03	X									
SP	Eli Lilly & Co		X		03/19/03	X									
SP	Eli Lilly & Co		X		05/12/03	X									
SP	Eli Lilly & Co		X		05/13/03	X									
SP	Eli Lilly & Co		X		05/15/03	X									
SP	Eli Lilly & Co		X		05/16/03	X									
SP	FPL Group Inc		X		02/27/03	X									
SP	FPL Group Inc		X		04/04/03	X									
SP	FPL Group Inc		X		04/22/03	X									
SP	FPL Group Inc		X		08/25/03	X									
SP	FPL Group Inc		X		08/26/03	X									
SP	FPL Group Inc		X		08/27/03	X									
SP	FPL Group Inc		X		09/02/03	X									
SP	Freddie Mac Cmn		X		02/10/03	X									
SP	Freddie Mac Cmn		X		02/11/03	X									
SP	Freddie Mac Cmn		X		02/12/03	X									
SP	Freddie Mac Cmn		X		02/14/03	X									
SP	Freddie Mac Cmn		X		03/14/03	X									
SP	Freddie Mac Cmn		X		03/17/03	X									
SP	Freddie Mac Cmn		X		03/19/03	X									
SP	Gannett Co Inc		X		02/10/03	X									
SP	Gannett Co Inc		X		06/10/03	X									
SP	Gannett Co Inc		X		06/11/03	X									
SP	Gannett Co Inc		X		06/12/03	X									
SP	Gannett Co Inc		X		06/16/03	X									
SP	Gannett Co Inc		X		08/12/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Gannett Co Inc		X		08/13/03	X									
SP	Gannett Co Inc		X		08/14/03	X									
SP	Gannett Co Inc		X		08/15/03	X									
SP	Gannett Co Inc		X		08/18/03	X									
SP	Gannett Co Inc		X		08/19/03	X									
SP	Gannett Co Inc		X		08/20/03	X									
SP	Gannett Co Inc		X		08/21/03	X									
SP	Guidant Corp		X		10/14/03	X									
SP	Guidant Corp		X		10/29/03	X									
SP	HJ Heinz Co		X		12/03/03	X									
SP	Hartford Financial Srvcs Grp		X		02/18/03	X									
SP	Hartford Financial Srvcs Grp		X		02/18/03	X									
SP	Hartford Financial Srvcs Grp		X		03/12/03	X									
SP	Hasbro Inc		X		11/05/03	X									
SP	Home Depot Inc		X		03/13/03	X									
SP	Intel Corp		X		05/27/03	X									
SP	International Paper Co		X		04/07/03	X									
SP	International Paper Co (8 Transactions)		X		4/9 - 10/6/03	X									
SP	International Paper Co		X		04/22/03	X									
SP	International Paper Co		X		09/22/03	X									
SP	International Paper Co		X		09/26/03	X									
SP	Johnson & Johnson		X		03/24/03	X									
SP	Kellog Co		X		01/23/03	X									
SP	Keyspan Corp		X		01/14/03	X									
SP	Keyspan Corp		X		01/15/03	X									
SP	Knight Ridder Inc		X		11/06/03	X									
SP	Kroger Company (6 Transactions)		X		7/14 - 7/29/03	X									
SP	Kroger Company		X		07/18/03	X									
SP	Kroger Company		X		07/22/03	X									
SP	Kroger Company		X		07/30/03	X									
SP	Kroger Company		X		07/31/03	X									
SP	Mellon Financial Corp		X		08/25/03	X									
SP	Merck & Co		X		01/28/03	X									
SP	Merck & Co		X		02/04/03	X									
SP	Microsoft Corp		X		12/16/03	X									
SP	Motorola Inc		X		08/12/03	X									
SP	Motorola Inc		X		10/03/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Motorola Inc		X		11/06/03	X									
SP	National City Corp (7 Transactions)		X		3/12 - 8/18/03	X									
SP	National City Corp		X		03/13/03	X									
SP	National City Corp		X		07/30/03	X									
SP	National City Corp		X		08/08/03	X									
SP	National City Corp		X		08/12/03	X									
SP	National City Corp		X		08/14/03	X									
SP	National City Corp		X		02/28/03	X									
SP	Nike Class B Cmn		X		02/26/03	X									
SP	Nike Class B Cmn		X		06/11/03	X									
SP	Nike Class B Cmn		X		06/12/03	X									
SP	Nike Class B Cmn		X		06/13/03	X									
SP	Nike Class B Cmn		X		06/16/03	X									
SP	Nortel Networks Corp		X		09/11/03	X									
SP	Nortel Networks Corp		X		09/12/03	X									
SP	Nortel Networks Corp		X		09/16/03	X									
SP	Nortel Networks Corp		X		09/18/03	X									
SP	Nortel Networks Corp		X		11/19/03	X									
SP	Novellus Systems Inc		X		06/06/03	X									
SP	Novellus Systems Inc		X		06/16/03	X									
SP	Nstar Cmn		X		04/28/03	X									
SP	Nstar Cmn		X		04/29/03	X									
SP	Nstar Cmn		X		09/22/03	X									
SP	Nstar Cmn		X		10/22/03	X									
SP	Nstar Cmn		X		11/10/03	X									
SP	Nstar Cmn		X		12/03/03	X									
SP	Pepsico Inc		X		07/22/03	X									
SP	Pepsico Inc		X		07/23/03	X									
SP	Pepsico Inc		X		07/24/03	X									
SP	Pepsico Inc		X		08/04/03	X									
SP	Pepsico Inc		X		09/22/03	X									
SP	Pepsico Inc		X		10/28/03	X									
SP	Pepsico Inc		X		11/05/03	X									
SP	Pfizer Inc		X		04/03/03		X								
SP	Pfizer Inc		X		06/16/03	X									
SP	Pfizer Inc		X		06/23/03	X									
SP	Praxair Inc		X		01/07/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Praxair Inc		X		01/28/03	X									
SP	Praxair Inc		X		01/29/03	X									
SP	Praxair Inc		X		01/30/03	X									
SP	Procter & Gamble Co		X		05/27/03	X									
SP	Reed Elsevier PLC Spon ADR		X		04/23/03	X									
SP	Safeway Inc		X		05/27/03	X									
SP	Safeway Inc		X		05/28/03	X									
SP	Safeway Inc		X		05/29/03	X									
SP	Safeway Inc		X		05/30/03	X									
SP	SBC Communications Inc		X		06/16/03	X									
SP	SBC Communications Inc		X		06/17/03	X									
SP	SBC Communications Inc		X		09/03/03	X									
SP	SBC Communications Inc		X		09/10/03	X									
SP	SBC Communications Inc		X		09/11/03	X									
SP	Southtrust Corp		X		04/23/03	X									
SP	Southtrust Corp		X		06/27/03	X									
SP	Southtrust Corp (7 Transactions)		X		9/11 - 10/06/03	X									
SP	Southtrust Corp		X		09/23/03	X									
SP	Southtrust Corp		X		10/07/03	X									
SP	Southtrust Corp		X		10/08/03	X									
SP	Starwood Hotels & Resorts WW Inc		X		09/18/03	X									
SP	Starwood Hotels & Resorts WW Inc		X		09/19/03	X									
SP	Syngenta AG Spon ADR (11 Transactions)		X		2/11 - 8/05/03	X									
SP	Syngenta AG Spon ADR		X		04/23/03	X									
SP	Syngenta AG Spon ADR		X		07/31/03	X									
SP	Texas Instruments Inc		X		05/06/03	X									
SP	Texas Instruments Inc		X		08/25/03	X									
SP	Texas Instruments Inc		X		10/03/03	X									
SP	Texas Instruments Inc		X		10/07/03	X									
SP	Texas Instruments Inc		X		10/21/03	X									
SP	Texas Instruments Inc		X		10/22/03	X									
SP	Tribune Co		X		10/29/03	X									
SP	Tribune Co		X		12/31/03	X									
SP	TXU Corp		X		12/23/03	X									
SP	Wachovia Corp		X		05/19/03	X									
SP	Wachovia Corp		X		06/19/03	X									
SP	Wachovia Corp		X		06/20/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Wachovia Corp		X		06/23/03	X									
SP	Wachovia Corp		X		06/24/03	X									
SP	Wachovia Corp		X		08/12/03	X									
SP	Wachovia Corp		X		08/13/03	X									
SP	Wachovia Corp		X		08/14/03	X									
SP	ABN Amro Hlds Nv Spon ADR	X			05/07/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR	X			08/01/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR	X			08/04/03	X									
SP	Aventis Spon ADR	X			01/04/03	X									
SP	Aventis Spon ADR	X			01/10/03	X									
SP	Aventis Spon ADR	X			02/05/03	X									
SP	Aventis Spon ADR	X			02/10/03	X									
SP	Aventis Spon ADR	X			03/27/03	X									
SP	Aventis Spon ADR	X			03/28/03	X									
SP	Aventis Spon ADR	X			07/30/03	X									
SP	BAA PLC Spon ADR	X			11/06/03	X									
SP	BAA PLC Spon ADR	X			12/18/03	X									
SP	Bank Fukuoka Ltd ADR	X			09/16/03	X									
SP	Bank Fukuoka Ltd ADR	X			12/22/03	X									
SP	Bank of East Asia Ltd Spon ADR	X			03/19/03	X									
SP	Bank of East Asia Ltd Spon ADR	X			03/31/03	X									
SP	Bank of East Asia Ltd Spon ADR	X			06/05/03	X									
SP	Bank of Ireland Spon ADR	X			07/24/03	X									
SP	Bank of Ireland Spon ADR	X			07/31/03	X									
SP	Bank of Ireland Spon ADR	X			09/04/03	X									
SP	BOC Grp PLC ADR	X			11/04/03	X									
SP	BT Group PLC ADR	X			06/12/03	X									
SP	BT Group PLC ADR	X			07/09/03	X									
SP	Bunzl PLC Spon ADR	X			12/18/03	X									
SP	Canon Inc ADR	X			12/18/03	X									
SP	Centrica PLC Spon ADR	X			01/31/03	X									
SP	Centrica PLC Spon ADR	X			02/28/03	X									
SP	Danske Bk A/S ADR	X			11/07/03	X									
SP	DBS Grp Hldngs Spon ADR	X			06/02/03	X									
SP	Deutsche Bank AG	X			03/04/03	X									
SP	Deutsche Bank AG	X			08/26/03	X									
SP	Deutsche Bank AG	X			08/29/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	E.ON AG Spon ADR	X			04/01/03	X									
SP	E.ON AG Spon ADR	X			07/14/03	X									
SP	Eisai Co Ltd Spon ADR	X			05/15/03	X									
SP	Eisai Co Ltd Spon ADR	X			07/08/03	X									
SP	Eni SPA Spon ADR	X			09/02/03	X									
SP	Eni SPA Spon ADR	X			09/15/03	X									
SP	Fortis (NL) NV Spon ADR	X			09/24/03	X									
SP	Fortis (NL) NV Spon ADR	X			12/11/03	X									
SP	Fortis (NL) NV Spon ADR	X			03/04/03	X									
SP	Fuji Heavy Ind Ltd ADR	X			02/03/04	X									
SP	Fuji Heavy Ind Ltd ADR	X			10/08/03	X									
SP	Fuji Photo ADR	X			07/14/03	X									
SP	Fuji Photo ADR	X			08/07/03	X									
SP	Fuji Photo ADR	X			09/24/03	X									
SP	Fuji Photo ADR	X			10/07/03	X									
SP	Hachijuni Bank Ltd ADR	X			09/17/03	X									
SP	Hellenic Telecom Organ SA	X			03/31/03	X									
SP	Hellenic Telecom Organ SA	X			04/02/03	X									
SP	Honda Mtr Ltd	X			09/24/03	X									
SP	Honda Mtr Ltd	X			11/04/03	X									
SP	J Sainsbury PLC Spon ADR	X			01/07/03	X									
SP	J Sainsbury PLC Spon ADR	X			03/21/03	X									
SP	J Sainsbury PLC Spon ADR	X			07/24/03	X									
SP	KAO Corp ADR	X			05/23/03	X									
SP	Korea Electic Power Corp ADR	X			01/24/03	X									
SP	Lloyds TSB Grp PLC Spon ADR	X			09/23/03	X									
SP	Marks & Spencer PLC Spon ADR	X			06/25/03	X									
SP	Marks & Spencer PLC Spon ADR	X			09/02/03	X									
SP	Marks & Spencer PLC Spon ADR	X			09/15/03	X									
SP	Marks & Spencer PLC Spon ADR	X			11/04/03	X									
SP	Matsushita Elec Indl ADR	X			05/28/03	X									
SP	Matsushita Elec Indl ADR	X			06/27/03	X									
SP	Minebea Co Ltd Spon ADR	X			03/27/03	X									
SP	Minebea Co Ltd Spon ADR	X			03/31/03	X									
SP	Minebea Co Ltd Spon ADR	X			12/19/03	X									
SP	National Australia Bank Ltd Spon ADR	X			10/14/03	X									
SP	National Australia Bank Ltd Spon ADR	X			11/04/03	X									

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SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction								
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	National Australia Bank Ltd Spon ADR	X			12/02/03	X									
SP	Nedcor Ltd Spon ADR	X			08/27/03	X									
SP	Nedcor Ltd Spon ADR	X			08/28/03	X									
SP	Nestle SA Spon ADR	X			01/24/03	X									
SP	Nestle SA Spon ADR	X			01/31/03	X									
SP	Nestle SA Spon ADR	X			03/28/03	X									
SP	Nestle SA Spon ADR	X			05/16/03	X									
SP	Nippon Teleg & Tel Spon ADR	X			10/07/03	X									
SP	Novartis AG-ADR	X			03/17/03	X									
SP	Pernod Ricard ADR	X			01/27/03	X									
7/	Rexam PLC ADR	X			07/07/03	X									
SP	Rexam PLC ADR	X			07/31/03	X									
SP	Roche Holding AG ADR	X			02/28/03	X									
SP	Sekisui Homes Ltd Spon ADR	X			10/08/03	X									
SP	Shiseido Co Ltd Spon ADR	X			10/08/03		X								
SP	Sun Hung Kai Prop Ltd Spon ADR	X			06/09/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR	X			07/25/03	X									
SP	Telecom Italia SPA Spon ADR	X			01/08/03	X									
SP	Telecom Italia SPA Spon ADR	X			03/06/03	X									
SP	Telefonos De Mexico SA Spon ADR	X			01/24/03	X									
SP	Thomson SA Spon ADR	X			03/04/03	X									
SP	Thomson SA Spon ADR	X			03/07/03	X									
SP	Thomson SA Spon ADR	X			03/31/03	X									
SP	Thomson SA Spon ADR	X			04/01/03	X									
SP	Thomson SA Spon ADR	X			04/15/03	X									
SP	Toyota Motor Corp Spon ADR	X			04/16/03	X									
SP	Toyota Motor Corp Spon ADR	X			04/24/03	X									
SP	Toyota Motor Corp Spon ADR	X			05/08/03	X									
SP	Toyota Motor Corp Spon ADR	X			10/07/03	X									
SP	United Microelectronics Corp Spon ADR	X			12/23/03	X									
SP	United Microelectronics Corp Spon ADR	X			03/04/03	X									
SP	UPM-Kymmene Corp Spon ADR	X			05/30/03	X									
SP	UPM-Kymmene Corp Spon ADR	X			06/27/03	X									
SP	Volkswagon AG Spon ADR	X			04/22/03	X									
SP	Volkswagon AG Spon ADR	X			07/24/03	X									
SP	Wolters Kluwer Spon ADR	X			06/03/03	X									
SP	Wolters Kluwer Spon ADR	X			07/24/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Zurich Financial Services Spon ADR	X			08/08/03	X									
SP	Zurich Financial Services Spon ADR	X			09/15/03	X									
SP	Zurich Financial Services Spon ADR	X			99/24/3	X									
SP	Zurich Financial Services Spon ADR	X			12/29/03	X									
SP	ABN Amro Hlds Nv Spon ADR		X		03/20/03	X									
SP	ABN Amro Hlds Nv Spon ADR		X		06/02/03	X									
SP	ABN Amro Hlds Nv Spon ADR		X		09/17/03	X									
SP	Allied Domecq PLC Spon ADR		X		01/08/03	X									
SP	Allied Domecq PLC Spon ADR		X		06/20/03		X								
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		01/31/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		05/22/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		06/12/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		10/09/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		10/16/03	X									
SP	Australia & New Zealand Bkg Grp Ltd Spon ADR		X		10/20/03	X									
SP	Autoliv Inc		X		02/05/03	X									
SP	Autoliv Inc		X		03/28/03	X									
SP	Autoliv Inc		X		10/15/03	X									
SP	Aventis Spon ADR		X		10/08/03	X									
SP	BAE Systems PLC Spon ADR		X		10/09/03	X									
SP	Bank of East Asia Ltd Spon ADR		X		06/24/03	X									
SP	Bank of East Asia Ltd Spon ADR		X		11/03/03	X									
SP	Bank of East Asia Ltd Spon ADR		X		11/04/03	X									
SP	Bank of East Asia Ltd Spon ADR		X		12/03/03	X									
SP	Bank of Ireland Spon ADR		X		02/07/03	X									
SP	Bank of Ireland Spon ADR		X		02/28/03	X									
SP	Bank of Ireland Spon ADR		X		03/04/03	X									
SP	Bank of Ireland Spon ADR		X		05/22/03	X									
SP	Barclays PLC ADR		X		09/24/03	X									
SP	Bayer AG Spon ADR		X		02/26/03	X									
SP	Bayer AG Spon ADR		X		02/27/03	X									
SP	Bayer AG Spon ADR		X		03/05/03	X									
SP	BNP Paribas Spon ADR		X		02/11/03	X									
SP	Buhrmann NV Spon ADR		X		08/11/03	X									
SP	Bunzl PLC Spon ADR		X		04/17/03	X									
SP	Cadbury Schweppes PLC ADR		X		06/20/03		X								
SP	Canon Inc ADR		X		05/05/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Canon Inc ADR		X		06/11/03	X									
SP	Canon Inc ADR		X		06/17/03	X									
SP	Canon Inc ADR		X		09/24/03	X									
SP	China Mobile Hong Kong Ltd Spon ADR		X		09/24/03	X									
SP	Creative Technology Ltd		X		06/24/03	X									
SP	Creative Technology Ltd		X		10/13/03	X									
SP	DBS Grp Hldngs Spon ADR		X		08/26/03	X									
SP	DBS Grp Hldngs Spon ADR		X		11/04/03	X									
SP	Deutsche Bank AG		X		03/19/03	X									
SP	Deutsche Bank AG		X		06/02/03	X									
SP	Deutsche Bank AG		X		12/08/03	X									
SP	Deutsche Bank AG		X		12/22/03	X									
SP	E.ON AG Spon ADR		X		05/16/03	X									
SP	E.ON AG Spon ADR		X		12/29/03	X									
SP	EDP-Electricidade De Portugal Spon ADR		X		09/16/03	X									
SP	Eisai Co Ltd Spon ADR		X		09/24/03	X									
SP	Eisai Co Ltd Spon ADR		X		11/20/03	X									
SP	Endesa SA ADR		X		05/16/03	X									
SP	Endesa SA ADR		X		09/16/03	X									
SP	Endesa SA ADR		X		12/24/03	X									
SP	Eni SPA Spon ADR		X		01/07/03	X									
SP	Fortis (NL) NV Spon ADR		X		01/08/03	X									
SP	Hellenic Telecom Organ SA		X		02/07/03	X									
SP	Hellenic Telecom Organ SA		X		12/22/03	X									
SP	Hellenic Telecom Organ SA		X		12/23/03	X									
SP	Honda Mtr Ltd		X		02/07/03	X									
SP	Hunter Douglas NV		X		01/17/03	X									
SP	Hunter Douglas NV		X		01/22/03	X									
SP	Hunter Douglas NV		X		01/23/03	X									
SP	J Sainsbury PLC Spon ADR		X		11/20/03	X									
SP	KAO Corp ADR		X		02/07/03	X									
SP	Konami Co Ltd Spon ADR		X		09/29/03	X									
SP	Konami Co Ltd Spon ADR		X		10/06/03	X									
SP	Konami Co Ltd Spon ADR		X		10/14/03	X									
SP	Koninklijke Ahold NV Spon ADR		X		03/07/03	X									
SP	Koninklijke Ahold NV Spon ADR		X		03/10/03	X									
SP	Koninklijke Ahold NV Spon ADR		X		03/10/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Koninklijke Philips Electrs NV Spon ADR		X		12/23/03	X									
SP	Korea Electic Power Corp ADR		X		09/24/03	X									
SP	Matsushita Elec Indl ADR		X		07/16/03	X									
SP	Matsushita Elec Indl ADR		X		07/16/03	X									
SP	Nippon Teleg & Tel Spon ADR		X		09/22/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		02/07/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		04/22/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		05/08/03	X									
SP	Nissan Motor Co Ltd Spon ADR		X		06/02/03	X									
SP	Nokia Corp Spon ADR		X		06/02/03	X									
SP	Pernod Ricard ADR		X		02/28/03		X								
SP	Petrochina Co Ltd Spon ADR		X		01/14/03	X									
SP	Petroleo Brasileiro SA Petrobr Spon ADR		X		01/14/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		02/05/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		05/22/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		10/03/03	X									
SP	Portugal Telecom SGPS SA Spon ADR		X		11/17/03	X									
SP	Roche Holding AG ADR		X		06/05/03	X									
SP	Roche Holding AG ADR		X		06/18/03	X									
SP	Roche Holding AG ADR		X		08/26/03	X									
SP	Roche Holding AG ADR		X		10/06/03	X									
SP	Roche Holding AG ADR		X		10/10/03	X									
SP	Roche Holding AG ADR		X		10/21/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		10/09/03	X									
SP	San Paolo-IMI SPA Spon ADR		X		10/09/03	X									
SP	Sao Paolo-IMI SPA Spon ADR		X		11/04/03	X									
SP	Sao Paolo-IMI SPA Spon ADR		X		12/03/03	X									
SP	Santos Ltd Spon ADR		X		02/05/03	X									
SP	Santos Ltd Spon ADR		X		12/19/03	X									
SP	Sekisui Homes Ltd Spon ADR		X		04/21/03	X									
SP	Sekisui Homes Ltd Spon ADR		X		08/26/03	X									
SP	Shell Trns&Trdng PLC NY Shs		X		01/14/03		X								
SP	Statoil ASA Spon ADR		X		02/28/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR		X		09/24/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR		X		11/03/03	X									
SP	Sun Hung Kai Prop Ltd Spon ADR		X		11/04/03	X									
SP	Swire Pacific Ltd Spon ADR		X		02/11/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
SIDNEY HARMAN CHARITABLE REMAINDER TRUST

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,000	Over $50,000,000
SP	Swire Pacific Ltd Spon ADR		X		09/15/03	X									
SP	TDK Corp of New Zealand		X		09/23/03	X									
SP	Telecom Corp of New Zealand		X		02/05/03	X									
SP	Telecom Corp of New Zealand		X		05/23/03	X									
SP	Telecom Corp of New Zealand		X		09/25/03	X									
SP	Telecom Italia SPA Spon ADR		X		04/15/03	X									
SP	Telecom Italia SPA Spon ADR		X		05/29/03	X									
SP	Telecom Italia SPA Spon ADR		X		06/05/03	X									
SP	Telecomunicacoes Brasileiras SA ADR		X		06/02/03	X									
SP	Telecomunicacoes Brasileiras SA ADR		X		11/04/03	X									
SP	Thomson SA Spon ADR		X		06/05/03	X									
SP	Thomson SA Spon ADR		X		06/05/03	X									
SP	Thomson SA Spon ADR		X		12/02/03	X									
SP	Toyota Motor Corp Spon ADR		X		12/23/03	X									
SP	UBS AG Cmn		X		05/22/03	X									
SP	Unilever PLC Spon ADR		X		01/03/03	X									
SP	Unilever PLC Spon ADR		X		01/07/03	X									
SP	United Microelectronics Corp Spon ADR		X		11/03/03	X									
SP	Volkswagon AG Spon ADR		X		12/18/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 15 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

	Asset	Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Vanguard Index Trust S&P 500		X		04/30/03					X					
SP	Scudder International Cl S		X		04/30/03				X						
SP															
SP															
SP															
SP															

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Blum Strategic Partners II LP	X			06/03/03		X								
SP	Blum Strategic Partners II LP	X			07/16/03				X						
SP	Blum Strategic Partners II LP	X			09/17/03			X							
SP	Blum Strategic Partners II LP	X			10/27/03			X							
SP	Blum Strategic Partners II LP	X			11/07/03			X							
SP	Goldman Sachs Hedge Fund Prtnrs LLC	X			05/01/03						X				
SP	Goldman Sachs Strategic Europe Prtnrs LLC	X			05/01/03						X				
SP	JBG/Fund III Investor LLC	X			03/31/03					X					
SP	JBG/Fund III Investor LLC	X			05/16/03			X							
SP	JBG/Fund III Investor LLC	X			10/21/03		X								
SP	Belo Corporation	X			07/22/03		X								
SP	Charter One Finl Inc	X			11/04/03	X									
SP	Dow Jones & Co	X			03/14/03		X								
SP	Eastman Kodak Co	X			12/24/03		X								
SP	McGraw-Hill Companies Inc	X			09/29/03		X								
SP	Mercantile Bankshares Corp	X			12/03/03		X								
SP	MGM Mirage	X			01/23/03		X								
SP	Peoplesoft Inc	X			05/13/03			X							
SP	Radioshack Corp	X			12/24/03	X									
SP	Sybase Inc	X			09/26/03	X									
SP	Universal Health Svc Inc	X			02/11/03				X						
SP	Alltel Corp		X		03/28/03		X								
SP	Alltel Corp		X		03/28/03			X							
SP	Alltel Corp		X		03/28/03				X						
SP	Apple Computer Inc		X		03/28/03		X								
SP	Apple Computer Inc		X		03/28/03			X							
SP	Bandag Inc		X		03/28/03			X							
SP	Banknorth Group Inc		X		03/28/03			X							
SP	Bear Stearns Cos Inc		X		03/28/03				X						
SP	Charter One Finl Inc		X		03/28/03			X							
SP	Chittenden Corp		X		06/10/03	X									
SP	Chittenden Corp		X		03/28/03		X								
SP	Cigna Corp		X		11/04/03		X								
SP	Cigna Corp		X		03/28/03		X								
SP	Cognos Inc		X		04/24/03	X									
SP	Cognos Inc		X		05/02/03	X									
SP	Cognos Inc		X		03/28/03			X							

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Computer Assoc Intl Inc		X		03/28/03				X						
SP	Connecticut Bancshares Inc		X		03/28/03				X						
SP	Countrywide Fincl Corp		X		03/28/03				X						
SP	Credence Sys Corp		X		03/27/03			X							
SP	Datascope Corp		X		03/28/03		X								
SP	Dow Jones & Co		X		03/28/03		X								
SP	Dow-Jones & Co		X		10/28/03		X								
SP	Dundee Bancorp Inc		X		03/28/03			X							
SP	FAB Inds Inc		X		09/11/03	X									
SP	Fahnestock Vineer Hodgs Inc		X		03/28/03	X									
SP	Fahnestock Vineer Hodgs Inc		X		03/28/03		X								
SP	Fidelity Bankshares Inc		X		03/28/03				X						
SP	Forest City Enterproses Inc		X		03/28/03	X									
SP	Forest City Enterproses Inc		X		03/28/03		X								
SP	Gannett Co Inc		X		03/28/03				X						
SP	Harrahs Entmt Inc		X		03/27/03				X						
SP	Imation Corp		X		03/28/03	X									
SP	Imation Corp		X		03/28/03				X						
SP	Independence County Bk Corp		X		03/28/03				X						
SP	International Game Technology		X		03/27/03					X					
SP	Interstate Bakeries Corp		X		01/15/03				X						
SP	Janus Cap Group Inc (fka Stillwell)		X		09/04/03		X								
SP	Janus Cap Group Inc (fka Stillwell)		X		03/28/03			X							
SP	Kimball Intl Inc		X		03/28/03		X								
SP	Knight Ridder Inc		X		03/28/03			X							
SP	Knight Ridder Inc		X		03/28/03			X							
SP	Lawson Products Inc		X		03/28/03		X								
SP	Marcus Corp		X		11/28/03		X								
SP	Marcus Corp		X		03/28/03		X								
SP	McClatchy Co		X		03/28/03	X									
SP	McClatchy Co		X		03/28/03				X						
SP	Mentor Graphics		X		03/28/03	X									
SP	MGM Mirage		X		03/27/03				X						
SP	Midas Inc		X		03/28/03	X									
SP	Midas Inc		X		11/07/03		X								
SP	Mine Safety Applicances Co		X		03/28/03	X									
SP	Mine Safety Applicances Co		X		03/28/03		X								

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	NCR Corp		X		03/28/03		X								
SP	New York Times Co		X		03/28/03					X					
SP	Penn Engr & Mfg Corp		X		03/28/03		X								
SP	Progress Software Corp		X		03/28/03			X							
SP	Qualcomm Inc		X		03/28/03		X								
SP	Qualcomm Inc		X		03/28/03			X							
SP	Quantum Corp		X		03/28/03		X								
SP	Raymond James Finl Inc		X		03/28/03		X								
SP	Ryans Family Steak House		X		03/28/03			X							
SP	Scientific Atlanta Inc		X		09/04/03	X									
SP	Scientific Atlanta Inc		X		07/14/03	X									
SP	Scientific Atlanta Inc		X		03/28/03			X							
SP	Scientific Atlanta Inc		X		03/28/03			X							
SP	Scientific Atlanta Inc		X		03/28/03				X						
SP	Storage Technology Corp		X		03/27/03			X							
SP	Tektronix Inc		X		03/28/03		X								
SP	Topps Company Inc		X		03/28/03			X							
SP	Triumph Group Inc		X		05/22/03		X								
SP	UCBH Holdings Inc		X		03/28/03				X						
SP	UCBH Holdings Inc		X		09/22/03		X								
SP	Universal Health Rlty Inc		X		03/28/03		X								
SP	Universal Health Svcs Inc		X		03/28/03		X								
SP	Universal Health Svcs Inc		X		03/28/03			X							
SP	Universal Health Svcs Inc		X		08/02/03		X								
SP	Valassis Communications Inc		X		03/28/03			X							
SP	Valassis Communications Inc		X		03/28/03	X									
SP	Virco Mfg Co		X		03/28/03		X								
SP	Washington Mutual Inc		X		03/28/03		X								
SP	Weis Markets Inc		X		03/28/03		X								
SP	West Pharmaceuticals Svcs Inc		X		03/28/03						X				
SP	Goldman Sachs High Yield A Mutual Fnd	X			04/04/03					X					
SP	AB Svensk Exportkredit Mtn 7/15/05	X			06/10/03				X						
SP	Goldman Sachs Grp Inc 0% 6/5/09 Nikkei Buffered Ein	X			11/28/03										
SP	3M Co	X			05/07/03	X									
SP	3M Co	X			12/05/03	X									
SP	Abbott Laboratories	X			03/12/03		X								
SP	AFLAC Inc	X			04/24/03	X									
SP	Air Products & Chemicals Inc	X			10/16/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

	Asset	Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Air Products & Chemicals Inc	X			10/27/03	X									
SP	ASML Holdings NV ADR	X			12/31/03		X								
SP	Boston Scientific Corp	X			04/22/03	X									
SP	Boston Scientific Corp	X			10/09/03	X									
SP	Boston Scientific Corp	X			11/07/03	X									
SP	Boston Scientific Corp	X			12/03/03		X								
SP	Boston Scientific Corp	X			12/29/03	X									
SP	Cisco Systems Inc	X			11/17/03	X									
SP	Cisco Systems Inc	X			12/01/03	X									
SP	Cisco Systems Inc	X			12/02/03	X									
SP	Citigroup Inc	X			01/27/03	X									
SP	Citigroup Inc	X			11/20/03	X									
SP	Coca-Cola Enterprises Inc	X			03/13/03		X								
SP	Coca-Cola Enterprises Inc	X			05/21/03	X									
SP	Danaher Corp	X			07/01/03	X									
SP	Danaher Corp	X			11/21/03	X									
SP	Dell Inc	X			08/26/03	X									
SP	Ebay Inc	X			10/20/03	X									
SP	Ebay Inc	X			11/11/03	X									
SP	Ebay Inc	X			12/03/03	X									
SP	Eli Lilly & Co	X			11/07/03	X									
SP	Eli Lilly & Co	X			12/01/03	X									
SP	Eli Lilly & Co	X			12/03/03	X									
SP	Fannie Mae Cmn	X			03/04/03				X						
SP	Genentech Inc	X			11/05/03	X									
SP	Genentech Inc	X			12/01/03	X									
SP	Gilead Sciences	X			10/21/03	X									
SP	Gilead Sciences	X			12/03/03		X								
SP	Gilead Sciences	X			12/05/03	X									
SP	Gilead Sciences	X			12/11/03	X									
SP	Gilead Sciences	X			12/29/03	X									
SP	Harley-Davidson Inc	X			06/06/03	X									
SP	Harley-Davidson Inc	X			06/17/03	X									
SP	Harley-Davidson Inc	X			10/15/03	X									
SP	Harley-Davidson Inc	X			11/05/03	X									
SP	Hartford Financial Srvcs Grp	X			05/20/03		X								
SP	Hewlett-Packard Co	X			08/12/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Hewlett-Packard Co	X			08/20/03	X									
SP	Hewlett Packard Co	X			09/09/03	X									
SP	Intel Corp	X			10/13/03	X									
SP	Kohl's Corp	X			09/16/03	X									
SP	Kohl's Corp	X			09/30/03	X									
SP	Kohl's Corp	X			10/16/03	X									
SP	Lockeed Martin Corp	X			01/16/03		X								
SP	Lockeed Martin Corp	X			03/19/03		X								
SP	Lockeed Martin Corp	X			03/21/03	X									
SP	Lowes Companies Inc	X			01/22/03		X								
SP	Lowes Companies Inc	X			12/24/03		X								
SP	McDonalds Corp	X			12/31/03		X								
SP	Medcohealth Solutions Inc (3 Transactions)	X			1/21 - 3/18/03	X									
SP	Medcohealth Solutions Inc	X			03/18/03	X									
SP	Medcohealth Solutions Inc	X			06/19/03	X									
SP	Medtronic Inc	X			03/04/03	X									
SP	Medtronic Inc	X			04/17/03	X									
SP	Medtronic Inc	X			11/25/03	X									
SP	Merck & Co Inc	X			01/21/03		X								
SP	Merck & Co Inc	X			03/04/03	X									
SP	Merck & Co Inc	X			03/12/03		X								
SP	Merck & Co Inc	X			03/18/03	X									
SP	Merck & Co Inc	X			06/19/03		X								
SP	Merrill Lynch Co Inc	X			02/13/03	X									
SP	Merrill Lynch Co Inc	X			03/04/03	X									
SP	Merrill Lynch Co Inc	X			08/12/03	X									
SP	Merrill Lynch Co Inc	X			12/31/03	X									
SP	Microchip Technology	X			09/24/03	X									
SP	Microchip Technology	X			12/03/03	X									
SP	News Corp Ltd ADR	X			11/18/03	X									
SP	Nike Class B	X			02/21/03		X								
SP	Nike Class B	X			05/14/03	X									
SP	Nike Class B	X			06/17/03	X									
SP	Nike Class B	X			12/10/03	X									
SP	Nokia Corp Spon ADR	X			08/05/03		X								
SP	Nokia Corp Spon ADR	X			10/31/03	X									
SP	Nokia Corp Spon ADR	X			11/06/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Novell Inc	X			11/13/03	X									
SP	Novell Inc	X			11/17/03	X									
SP	Novell Inc	X			11/24/03	X									
SP	Novell Inc	X			12/10/03	X									
SP	Oracle Corp	X			06/18/03	X									
SP	Oracle Corp	X			08/12/03	X									
SP	Oracle Corp	X			08/26/03	X									
SP	Oracle Corp	X			09/09/04	X									
SP	Oracle Corp	X			10/02/03	X									
SP	Oracle Corp	X			12/02/03	X									
SP	Oracle Corp	X			12/11/03	X									
SP	Oracle Corp	X			12/31/03		X								
SP	Peoplesoft Inc	X			01/14/03	X									
SP	Peoplesoft Inc	X			01/21/03	X									
SP	Procter & Gamble Co	X			01/27/03	X									
SP	Procter & Gamble Co	X			05/07/03	X									
SP	Procter & Gamble Co	X			11/05/03	X									
SP	Safeco Corp	X			07/10/03		X								
SP	SAP Aktiengesellschaft Spon ADR	X			06/24/03	X									
SP	SAP Aktiengesellschaft Spon ADR	X			10/30/03	X									
SP	SAP Aktiengesellschaft Spon ADR	X			11/07/03	X									
SP	SAP Aktiengesellschaft Spon ADR	X			12/17/03	X									
SP	St Jude Medical Inc	X			07/08/03		X								
SP	St Jude Medical Inc	X			07/22/03	X									
SP	St Jude Medical Inc	X			11/21/03	X									
SP	St Jude Medical Inc	X			11/25/03	X									
SP	St Jude Medical Inc	X			12/31/03	X									
SP	Starbucks Corp	X			11/07/03	X									
SP	Stryker Corp	X			03/04/03	X									
SP	Stryker Corp	X			04/16/03	X									
SP	Stryker Corp	X			05/22/03	X									
SP	Teva Pharmaceutical Ind Ltd	X			12/03/03	X									
SP	Tribune Co	X			07/15/03	X									
SP	Tribune Co	X			10/27/03	X									
SP	United Technologies Corp	X			10/23/03	X									
SP	United Technologies Corp	X			11/14/03	X									
SP	United Technologies Corp	X			11/20/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Veritas Software Corp	X			07/10/03		X								
SP	Veritas Software Corp	X			10/08/03	X									
SP	Veritas Software Corp	X			10/23/03	X									
SP	Veritas Software Corp	X			11/20/03	X									
SP	Veritas Software Corp	X			12/01/03	X									
SP	Veritas Software Corp	X			12/31/03	X									
SP	Viacom Inc Cl B	X			06/11/03	X									
SP	Viacom Inc Cl B	X			06/25/03	X									
SP	Viacom Inc Cl B	X			08/28/03	X									
SP	Viacom Inc Cl B	X			12/31/03	X									
SP	Vodafone Grp PLC Spon ADR	X			08/05/03	X									
SP	Walgreen Co	X			06/24/03	X									
SP	Walgreen Co	X			12/09/03	X									
SP	Walgreen Co	X			12/11/03	X									
SP	Wellpoint Health Networks Inc	X			04/23/03	X									
SP	Yahoo Inc	X			09/09/03	X									
SP	Yahoo Inc	X			10/08/03	X									
SP	Yahoo Inc	X			10/17/03	X									
SP	Yahoo Inc	X			10/23/03	X									
SP	Yahoo Inc	X			11/06/03	X									
SP	Yahoo Inc	X			11/17/03	X									
SP	Yahoo Inc	X			11/17/03	X									
SP	3M Co		X		04/02/03		X								
SP	Abbott Laboratories		X		04/02/03		X								
SP	Abbott Laboratories		X		08/14/03	X									
SP	Accenture Ltd		X		04/02/03		X								
SP	Amer Intl Grp Inc		X		02/05/03		X								
SP	Amer Intl Grp Inc		X		02/13/03		X								
SP	Amer Intl Grp Inc		X		04/02/03		X								
SP	Amerisourcebergen Corp		X		04/02/03	X									
SP	Amerisourcebergen Corp		X		11/06/03	X									
SP	Amerisourcebergen Corp		X		11/17/03	X									
SP	Amgen Inc		X		04/02/03				X						
SP	Automatic Data Processing Inc		X		04/02/03		X								
SP	Automatic Data Processing Inc		X		06/19/03	X									
SP	Automatic Data Processing Inc		X		10/23/03	X									
SP	Automatic Data Processing Inc		X		11/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Baxter International Inc		X		04/02/03		X								
SP	Baxter International Inc		X		04/17/03	X									
SP	Baxter International Inc		X		05/08/03	X									
SP	Cardinal Haith Inc		X		04/02/03			X							
SP	Cardinal Haith Inc		X		10/16/03	X									
SP	Cardinal Haith Inc		X		10/20/03	X									
SP	Cardinal Haith Inc		X		12/29/03	X									
SP	Cisco Systems Inc		X		04/01/03	X									
SP	Cisco Systems Inc		X		04/02/03			X							
SP	Citigroup Inc		X		04/02/03		X								
SP	Coca-Cola Co		X		04/02/03		X								
SP	Coca-Cola Enterprises Inc		X		04/02/03	X									
SP	Coca-Cola Enterprises Inc		X		08/14/03	X									
SP	Coca-Cola Enterprises Inc		X		08/21/03	X									
SP	Colgate-Palmolive Co		X		04/02/03			X							
SP	Colgate-Palmolive Co		X		11/17/03		X								
SP	Colgate-Palmolive Co		X		12/09/03	X									
SP	Colgate-Palmolive Co		X		12/31/03	X									
SP	Costco Wholesale Corp		X		04/02/03		X								
SP	Costco Wholesale Corp		X		09/02/03	X									
SP	Costco Wholesale Corp		X		09/16/03	X									
SP	Dell Computer Corp		X		04/02/03			X							
SP	Electronic Arts		X		04/02/03		X								
SP	Electronic Arts		X		09/29/03	X									
SP	Fannie Mae Cmn		X		04/02/03				X						
SP	Fannie Mae Cmn		X		06/17/03	X									
SP	Fannie Mae Cmn		X		09/24/03	X									
SP	Fannie Mae Cmn		X		10/02/03	X									
SP	Fannie Mae Cmn		X		11/20/03	X									
SP	Fannie Mae Cmn		X		12/03/03	X									
SP	Franklin Resources Inc		X		04/02/03		X								
SP	Franklin Resources Inc		X		08/21/03	X									
SP	Franklin Resources Inc		X		10/28/03	X									
SP	Freddie Mac Cmn		X		03/04/03				X						
SP	Genentech Inc		X		01/22/03			X							
SP	Genentech Inc		X		01/27/03		X								
SP	Genentech Inc		X		04/02/03		X								

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Genentech Inc		X		05/21/03	X									
SP	General Dynamics Corp		X		03/19/03		X								
SP	General Dynamics Corp		X		03/21/03	X									
SP	General Dynamics Corp		X		04/02/03	X									
SP	General Dynamics Corp		X		04/16/03	X									
SP	General Electric Co		X		04/02/03				X						
SP	General Electric Co		X		12/05/03	X									
SP	Gilead Sciences		X		10/310/3	X									
SP	Harley-Davidson Inc		X		12/09/03	X									
SP	Harley-Davidson Inc		X		12/09/03	X									
SP	Harley-Davidson Inc		X		12/09/03	X									
SP	Hartford Financial Srvcs Grp		X		10/02/03		X								
SP	Home Depot Inc		X		01/22/03			X							
SP	Intel Corp		X		04/02/03				X						
SP	Intl Business Machines Corp		X		04/02/03		X								
SP	Intl Business Machines Corp		X		08/05/03	X									
SP	Intl Business Machines Corp		X		10/13/03	X									
SP	Intl Business Machines Corp		X		11/05/03	X									
SP	Intl Business Machines Corp		X		11/11/03	X									
SP	Johnson & Johnson Cmn		X		03/12/03	X									
SP	Johnson & Johnson Cmn		X		04/07/03				X						
SP	Johnson & Johnson Cmn		X		10/09/03	X									
SP	Johnson & Johnson Cmn		X		10/15/03	X									
SP	Johnson & Johnson Cmn		X		11/25/03	X									
SP	Johnson & Johnson Cmn		X		12/29/03	X									
SP	Kohl's Corp		X		04/02/03		X								
SP	Kohl's Corp		X		12/17/03	X									
SP	Kohl's Corp		X		12/17/03	X									
SP	Kohl's Corp		X		12/30/03		X								
SP	Lockheed Martin Corp		X		06/30/03		X								
SP	Lockheed Martin Corp		X		10/23/03	X									
SP	Lockheed Martin Corp		X		12/29/03		X								
SP	Lowes Companies Inc		X		04/02/03		X								
SP	Marsh & McLennan Co Inc		X		04/02/03		X								
SP	Marsh & McLennan Co Inc		X		04/22/03	X									
SP	Marsh & McLennan Co Inc		X		06/25/03	X									
SP	Marsh & McLennan Co Inc		X		08/29/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	Marsh & McLennan Co Inc		X		10/24/03	X									
SP	Mattell Inc		X		04/02/03		X								
SP	Mattell Inc		X		06/06/03		X								
SP	Mattell Inc		X		12/31/03	X									
SP	Maxim Integrated Products Inc		X		04/02/03		X								
SP	Medcohealth Solutions Inc		X		10/20/03	X									
SP	Medimmune Inc		X		01/22/03	X									
SP	Medimmune Inc		X		01/29/03	X									
SP	Medimmune Inc		X		01/31/03	X									
SP	Medtronic Inc		X		04/02/03			X							
SP	Merck & Co Inc		X		04/16/03		X								
SP	Merck & Co Inc		X		11/28/03	X									
SP	Merck & Co Inc		X		11/28/03	X									
SP	Merck & Co Inc		X		12/03/03		X								
SP	Merrill Lynch Co Inc		X		04/02/03		X								
SP	Microsoft Corp		X		04/02/03					X					
SP	Microsoft Corp		X		08/26/03	X									
SP	Microsoft Corp		X		09/09/03	X									
SP	Microsoft Corp		X		10/29/03		X								
SP	Microsoft Corp		X		11/12/03	X									
SP	Microsoft Corp		X		11/17/03	X									
SP	Microsoft Corp		X		12/02/03		X								
SP	Microsoft Corp		X		12/31/03	X									
SP	Nike Class B		X		04/02/03	X									
SP	Nokia Corp Spon ADR		X		04/02/03		X								
SP	Nokia Corp Spon ADR		X		11/21/03	X									
SP	Nokia Corp Spon ADR		X		12/01/03	X									
SP	Nokia Corp Spon ADR		X		12/24/03	X									
SP	Nokia Corp Spon ADR		X		12/24/03	X									
SP	Oracle Corp		X		03/12/03	X									
SP	Oracle Corp		X		04/02/03		X								
SP	Peoplesoft Inc		X		04/02/03	X									
SP	Peoplesoft Inc		X		06/02/03	X									
SP	Pepsico Inc		X		04/02/03				X						
SP	Pepsico Inc		X		09/02/03	X									
SP	Pepsico Inc		X		11/06/03	X									
SP	Pepsico Inc		X		11/20/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Pepsico Inc		X		12/09/03	X									
SP	Pepsico Inc		X		12/30/03	X									
SP	Pfizer Inc		X		03/21/03			X							
SP	Pfizer Inc		X		04/02/03				X						
SP	Pfizer Inc		X		04/16/03		X								
SP	Pfizer Inc		X		11/05/03	X									
SP	Pfizer Inc		X		12/05/03		X								
SP	Pharmacia Corp		X		04/02/03				X						
SP	Procter & Gamble Co		X		04/02/03			X							
SP	Qualcomm Inc		X		02/13/03	X									
SP	Qualcomm Inc		X		02/13/03	X									
SP	Qualcomm Inc		X		02/13/03	X									
SP	Qualcomm Inc		X		04/02/03		X								
SP	Qualcomm Inc		X		10/09/03	X									
SP	Qualcomm Inc		X		11/28/03	X									
SP	Qualcomm Inc		X		12/02/03	X									
SP	Schering-Plough Corp		X		03/19/03			X							
SP	Starbucks Corp		X		04/02/03		X								
SP	Stryker Corp		X		04/02/03	X									
SP	Sysco Corp		X		04/02/03		X								
SP	Sysco Corp		X		07/15/03	X									
SP	Teva Pharmaceutical Ind Ltd		X		04/02/03			X							
SP	Teva Pharmaceutical Ind Ltd		X		12/16/03	X									
SP	Teva Pharmaceutical Ind Ltd		X		12/24/03	X									
SP	United Parcel Service Inc		X		04/02/03		X								
SP	United Technologies Corp		X		04/02/03			X							
SP	Veritas Software Corp		X		02/21/03		X								
SP	Veritas Software Corp		X		09/09/03	X									
SP	Viacom Inc Cl B		X		04/02/03		X								
SP	Vodafone Grp PLC Spon ADR		X		04/02/03		X								
SP	Wal Mart Stores Inc		X		04/02/03				X						
SP	Wal Mart Stores Inc		X		11/26/03				X						
SP	Walgreen Co		X		04/02/03			X							
SP	Walgreen Co		X		08/28/03	X									
SP	Wellpoint Health Networks Inc		X		04/02/03		X								
SP	Wellpoint Health Networks Inc		X		11/03/03	X									
SP	Wellpoint Health Networks Inc		X		11/07/03		X								

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Wyeth Cmn		X		04/02/03				X						
SP	Wyeth Cmn		X		04/23/03		X								
SP	Wyeth Cmn		X		05/27/03	X									
SP	Wyeth Cmn		X		06/19/03	X									
SP	Wyeth Cmn		X		12/03/03	X									
SP	Abbott Laboratories	X			05/28/03	X									
SP	Abbott Laboratories	X			05/29/03	X									
SP	Abbott Laboratories	X			06/02/03	X									
SP	Abbott Laboratories	X			06/16/03	X									
SP	Air Products & Chemicals Inc	X			04/17/03	X									
SP	Allstate Corp	X			04/17/03	X									
SP	Allstate Corp	X			06/09/03	X									
SP	American Express Co	X			08/12/03	X									
SP	American Express Co	X			08/13/03	X									
SP	American Express Co	X			08/14/03	X									
SP	American Express Co	X			09/15/03	X									
SP	Analog Devices Inc	X			04/17/03	X									
SP	Archer Daniels Midland Co	X			04/17/03	X									
SP	Archer Daniels Midland Co	X			07/22/03	X									
SP	Archer Daniels Midland Co	X			07/23/03	X									
SP	AT&T Corp	X			04/17/03	X									
SP	Bank of America Copr	X			04/17/03		X								
SP	Bank of America Copr	X			07/30/03	X									
SP	Bank of America Copr	X			09/11/03	X									
SP	Bellsouth Corp	X			04/17/03		X								
SP	Bowater Inc	X			04/17/03	X									
SP	Caterpillar Inc	X			04/17/03	X									
SP	Chubb Corp	X			04/17/03	X									
SP	Cinergy Corp (7 Transactions)	X			10/7 - 10/23/03	X									
SP	Cinergy Corp	X			11/07/03	X									
SP	Cinergy Corp	X			12/15/03	X									
SP	Citigroup Inc	X			04/17/03		X								
SP	Comcast Corp	X			09/10/03	X									
SP	Comcast Corp	X			09/11/03	X									
SP	Comcast Corp	X			09/12/03	X									
SP	Comcast Corp	X			09/16/03	X									
SP	Comcast Corp	X			09/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Comcast Corp	X			09/18/03	X									
SP	Comcast Corp	X			09/30/03	X									
SP	Comcast Corp	X			10/07/03	X									
SP	Comcast Corp	X			12/05/03	X									
SP	Cox Communications (12 Transactions)	X			5/23 - 6/19/03	X									
SP	Cox Communications	X			05/28/03	X									
SP	Cox Communications	X			06/24/03	X									
SP	Cox Communications	X			07/15/03	X									
SP	Cox Communications	X			08/13/03	X									
SP	Deere & Company	X			04/17/03		X								
SP	Disney Walt Co	X			04/17/03	X									
SP	Dow Chemical Co	X			04/17/03	X									
SP	Eli Lilly & Co	X			04/17/03	X									
SP	Emerson Electric Co (6 Transactions)	X			5/20 - 10/24/03	X									
SP	Emerson Electric Co	X			05/27/03	X									
SP	Emerson Electric Co	X			05/29/03	X									
SP	Emerson Electric Co	X			06/02/03	X									
SP	Emerson Electric Co	X			10/20/03	X									
SP	Fannie Mae Cmn	X			04/17/03		X								
SP	Fannie Mae Cmn	X			06/11/03	X									
SP	Fleet Boston Fincl Corp	X			04/17/03	X									
SP	Fleet Boston Fincl Corp	X			06/17/03	X									
SP	Fleet Boston Fincl Corp	X			06/18/03	X									
SP	Fleet Boston Fincl Corp	X			07/22/03	X									
SP	Fleet Boston Fincl Corp	X			07/30/03	X									
SP	FPL Group Inc	X			04/17/03	X									
SP	Gannett Co	X			04/17/03		X								
SP	Guidant Corp (5 Transactions)	X			6/16 - 6/20/03	X									
SP	Guidant Corp	X			06/24/03	X									
SP	HJ Heinz Co	X			04/17/03	X									
SP	HJ Heinz Co	X			09/23/03	X									
SP	Hartford Financial Srvcs Grp	X			04/17/03	X									
SP	Hartford Financial Srvcs Grp	X			06/09/03	X									
SP	Hartford Financial Srvcs Grp	X			06/10/03	X									
SP	Hartford Financial Srvcs Grp	X			12/23/03	X									
SP	Hasbro Inc (9 Transactions)	X			7/22 - 9/30/03	X									
SP	Intel Corp	X			04/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
		Purchase	Sale	Exchange	(MO/DAY/YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,00	J $25,000,001-$50,000,0	K Over $50,000,000
SP	International Paper Co	X			04/17/03	X									
SP	Intl Business Machines Corp	X			06/16/03	X									
SP	Intl Business Machines Corp	X			08/12/03	X									
SP	Intl Business Machines Corp	X			08/19/03	X									
SP	Johnson & Johnson Cmn	X			04/17/03	X									
SP	Johnson & Johnson Cmn	X			09/11/03	X									
SP	Johnson & Johnson Cmn	X			09/18/03	X									
SP	Johnson & Johnson Cmn	X			10/14/03	X									
SP	Johnson & Johnson Cmn	X			10/17/03	X									
SP	Johnson & Johnson Cmn	X			10/29/03	X									
SP	Johnson & Johnson Cmn	X			11/05/03	X									
SP	Kellogg Co	X			04/17/03		X								
SP	Kellogg Co	X			05/27/03	X									
SP	Keyspan Corp	X			04/17/03	X									
SP	Kimberly Clark Corp	X			04/17/03	X									
SP	Kimberly Clark Corp	X			04/24/03	X									
SP	Kimberly Clark Corp	X			05/28/03	X									
SP	Kimberly Clark Corp	X			07/24/03	X									
SP	Kimberly Clark Corp	X			08/04/03	X									
SP	Kimberly Clark Corp	X			08/25/03	X									
SP	Kimberly Clark Corp	X			12/01/03	X									
SP	Knight Ridder Inc	X			08/13/03	X									
SP	Kroger Company	X			04/17/03	X									
SP	Kroger Company (4 Transactions)	X			5/27 - 5/30/03	X									
SP	Lockheed Martin Corp	X			12/09/03	X									
SP	Lockheed Martin Corp	X			12/17/03	X									
SP	Mellon Financial Corp	X			04/17/03		X								
SP	Mellon Financial Corp	X			06/19/03	X									
SP	Merrill Lynch Co Inc	X			04/17/03	X									
SP	Merrill Lynch Co Inc	X			07/22/03	X									
SP	Metlife Inc	X			04/17/03	X									
SP	Metlife Inc (5 Transactions)	X			8/25 - 9/24/03	X									
SP	Micorsoft Corp	X			04/17/03	X									
SP	Motorola Inc	X			04/17/03	X									
SP	Motorola Inc	X			04/29/03	X									
SP	National City Corp	X			04/17/03	X									
SP	Nike Class B	X			04/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Nortel Networks Corp	X			07/29/03	X									
SP	Nortel Networks Corp	X			07/30/03	X									
SP	Nortel Networks Corp	X			08/27/03	X									
SP	Northrop Grumman Corp	X			08/17/03	X									
SP	Northrop Grumman Corp	X			10/06/03	X									
SP	Northrop Grumman Corp	X			10/17/03	X									
SP	Northrop Grumman Corp	X			10/22/03	X									
SP	Northrop Grumman Corp	X			12/19/03	X									
SP	Novartis AG-ADR	X			04/17/03	X									
SP	Novartis AG-ADR	X			05/12/03	X									
SP	Novellus Systems Inc	X			05/27/03	X									
SP	Novellus Systems Inc	X			05/28/03	X									
SP	Novellus Systems Inc	X			05/29/03	X									
SP	Nstar Cmn	X			04/17/03	X									
SP	Pepsico Inc	X			04/17/03	X									
SP	Pepsico Inc	X			05/27/03	X									
SP	Pfizer Inc	X			04/17/03		X								
SP	PPG Industries Inc	X			04/17/03	X									
SP	PPG Industries Inc	X			06/24/03	X									
SP	PPL Corporation (11 Transactions)	X			6/6 - 9/20/03	X									
SP	PPL Corporation	X			06/18/03	X									
SP	PPL Corporation	X			06/24/03	X									
SP	PPL Corporation	X			08/26/03	X									
SP	PPL Corporation	X			11/07/03	X									
SP	Procter & Gamble Co	X			04/17/03	X									
SP	Reed Elsevier PLC Spon ADR	X			04/17/03	X									
SP	Roche Holding AG ADR	X			08/13/03	X									
SP	Roche Holding AG ADR	X			08/15/03	X									
SP	Roche Holding AG ADR	X			09/16/03	X									
SP	Safeway Inc	X			04/17/03	X									
SP	SBC Communications Inc	X			04/17/03	X									
SP	SBC Communications Inc	X			05/12/03	X									
SP	SBC Communications Inc	X			10/24/03	X									
SP	SBC Communications Inc	X			11/06/03	X									
SP	SBC Communications Inc	X			11/11/03	X									
SP	SBC Communications Inc	X			11/20/03	X									
SP	Schering-Plough Corp	X			04/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Schering-Plough Corp (15 Transactions)	X			4/22 - 7/22/03	X									
SP	Sears Roebuck & Co	X			07/17/03	X									
SP	Sears Roebuck & Co	X			07/18/03	X									
SP	Sears Roebuck & Co	X			07/22/03	X									
SP	Sears Roebuck & Co	X			09/11/03	X									
SP	Southtrust Corp	X			04/17/03	X									
SP	Starwood Hotels & Resorts Worldwide Inc (7 Transactions)	X			5/13 - 6/24/03	X									
SP	Suntrust Banks Inc	X			04/17/03	X									
SP	Suntrust Banks Inc	X			05/19/03	X									
SP	Suntrust Banks Inc (6 Transactions)	X			6/10 - 10/29/03	X									
SP	Suntrust Banks Inc	X			06/24/03	X									
SP	Suntrust Banks Inc	X			09/03/03	X									
SP	Syngenta AG Spon ADR	X			04/17/03	X									
SP	Syngenta AG Spon ADR	X			12/03/03	X									
SP	Texas Instruments Inc	X			04/17/03	X									
SP	Time Warner Inc	X			10/29/03	X									
SP	Time Warner Inc	X			11/06/03	X									
SP	Time Warner Inc	X			12/03/03	X									
SP	St Paul Travelers Companies Inc	X			04/17/03	X									
SP	St Paul Travelers Companies Inc (10 Transactions)	X			4/25 - 10/8/03	X									
SP	St Paul Travelers Companies Inc	X			10/07/03	X									
SP	St Paul Travelers Companies Inc	X			12/31/03	X									
SP	Tribune Co	X			04/17/03	X									
SP	Tribune Co	X			06/10/03	X									
SP	Tribune Co	X			08/13/03	X									
SP	TXU Corp	X			04/17/03	X									
SP	TXU Corp (8 Transactions)	X			9/16 - 9/24/03	X									
SP	Union Pacific Corp	X			04/17/03	X									
SP	Union Pacific Corp	X			06/10/03	X									
SP	Union Pacific Corp	X			07/30/03	X									
SP	Union Pacific Corp	X			08/12/03	X									
SP	Union Pacific Corp	X			11/18/03	X									
SP	Union Pacific Corp	X			11/26/03	X									
SP	Verizon Communications Cmn	X			04/17/03	X									
SP	Verizon Communications Cmn	X			08/13/03	X									
SP	Verizon Communications Cmn	X			09/03/03	X									
SP	Verizon Communications Cmn	X			09/23/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Verizon Communications Cmn	X			09/24/03	X									
SP	Verizon Communications Cmn	X			10/07/03	X									
SP	Verizon Communications Cmn	X			10/28/03	X									
SP	Verizon Communications Cmn	X			11/17/03	X									
SP	Viacom Inc Cl B	X			04/17/03	X									
SP	Viacom Inc Cl B	X			08/13/03	X									
SP	Viacom Inc Cl B	X			09/15/03	X									
SP	Wachovia Corp	X			04/17/03	X									
SP	Abbott Laboratories (6 Transactions)		X		8/12 - 8/26/03	X									
SP	Abbott Laboratories		X		08/14/03	X									
SP	Abbott Laboratories		X		08/15/03	X									
SP	Air Products & Chemicals Inc		X		06/24/03	X									
SP	Allstate Corp		X		08/13/03	X									
SP	Analog Devices Inc		X		04/22/03	X									
SP	AT&T Corp		X		04/28/03	X									
SP	AT&T Corp		X		05/16/03	X									
SP	AT&T Corp		X		05/30/03	X									
SP	AT&T Corp		X		06/11/03	X									
SP	Bellsouth Corp		X		06/24/03	X									
SP	Bellsouth Corp		X		08/13/03	X									
SP	Bellsouth Corp		X		09/25/03	X									
SP	Bellsouth Corp		X		10/07/03	X									
SP	Bellsouth Corp		X		11/11/03	X									
SP	Bellsouth Corp		X		11/19/03	X									
SP	Bowater Inc		X		07/31/03	X									
SP	Caterpillar Inc		X		05/27/03	X									
SP	Caterpillar Inc		X		05/28/03	X									
SP	Chubb Corp		X		06/10/03	X									
SP	Chubb Corp		X		06/11/03	X									
SP	Citigroup Inc		X		05/09/03	X									
SP	Citigroup Inc		X		05/12/03	X									
SP	Citigroup Inc		X		10/20/03	X									
SP	Citigroup Inc		X		10/21/03	X									
SP	Citigroup Inc		X		10/23/03	X									
SP	Cox Communications		X		12/04/03	X									
SP	Deere & Company		X		04/28/03	X									
SP	Deere & Company		X		05/12/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Deere & Company		X		08/19/03	X									
SP	Deere & Company		X		09/11/03	X									
SP	Deere & Company		X		10/06/03	X									
SP	Deere & Company		X		10/22/03	X									
SP	Deere & Company		X		10/28/03	X									
SP	Deere & Company		X		11/18/03	X									
SP	Deere & Company		X		12/04/03	X									
SP	Disney Walt Co		X		05/22/03	X									
SP	Disney Walt Co		X		05/23/03	X									
SP	Disney Walt Co		X		05/27/03	X									
SP	Dow Chemical Co		X		05/20/03	X									
SP	Eli Lilly & Co		X		05/12/03	X									
SP	Eli Lilly & Co		X		05/15/03	X									
SP	Eli Lilly & Co		X		05/16/03	X									
SP	FPL Group Inc		X		04/22/03	X									
SP	FPL Group Inc (4 Transactions)		X		8/25 - 8/29/03	X									
SP	FPL Group Inc		X		08/26/03	X									
SP	FPL Group Inc		X		09/02/03	X									
SP	Gannett Co Inc		X		06/11/03	X									
SP	Gannett Co Inc		X		06/12/03	X									
SP	Gannett Co Inc		X		06/16/03	X									
SP	Gannett Co Inc		X		08/12/03	X									
SP	Gannett Co Inc		X		08/13/03	X									
SP	Gannett Co Inc		X		08/14/03	X									
SP	Gannett Co Inc		X		08/15/03	X									
SP	Gannett Co Inc		X		08/18/03	X									
SP	Gannett Co Inc		X		08/20/03	X									
SP	Gannett Co Inc		X		08/21/03	X									
SP	Guidant Corp		X		10/14/03	X									
SP	Guidant Corp		X		10/29/03	X									
SP	HJ Heinz Co		X		12/04/03	X									
SP	Hasbro Inc		X		11/05/03	X									
SP	Intel Corp		X		05/27/03	X									
SP	International Paper Co (6 Transactions)		X		9/22 - 10/6/03	X									
SP	Knight Ridder Inc		X		11/06/03	X									
SP	Kroger Company (6 Transactions)		X		7/14 - 7/29/03	X									
SP	Kroger Company		X		07/18/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Kroger Company		X		07/22/03	X									
SP	Kroger Company		X		07/30/03	X									
SP	Kroger Company		X		07/31/03	X									
SP	Mellon Financial Corp		X		08/25/03	X									
SP	Microsoft Corp		X		12/16/03	X									
SP	Motorola Inc		X		08/12/03	X									
SP	Motorola Inc		X		10/03/03	X									
SP	Motorola Inc		X		11/07/03	X									
SP	National City Corp (6 Transactions)		X		7/22 - 8/18/03	X									
SP	National City Corp		X		07/30/03	X									
SP	National City Corp		X		08/08/03	X									
SP	National City Corp		X		08/12/03	X									
SP	National City Corp		X		08/14/03	X									
SP	Nike Class B		X		06/11/03	X									
SP	Nike Class B		X		06/16/03	X									
SP	Nortel Networks Corp		X		09/12/03	X									
SP	Nortel Networks Corp		X		09/16/03	X									
SP	Nortel Networks Corp		X		09/18/03	X									
SP	Nortel Networks Corp		X		11/19/03	X									
SP	Novellus Systems Inc		X		06/16/03	X									
SP	Nstar Cmn		X		09/22/03	X									
SP	Nstar Cmn		X		11/10/03	X									
SP	Nstar Cmn		X		12/09/03	X									
SP	Pepsico Inc		X		07/22/03	X									
SP	Pepsico Inc		X		07/24/03	X									
SP	Pepsico Inc		X		08/04/03	X									
SP	Pepsico Inc		X		09/22/03	X									
SP	Pepsico Inc		X		10/28/03	X									
SP	Pepsico Inc		X		11/05/03	X									
SP	Pfizer Inc		X		06/16/03	X									
SP	Pfizer Inc		X		06/23/03	X									
SP	Procter & Gamble Co		X		05/27/03	X									
SP	Reed Elsevier PLC Spon ADR		X		04/23/03	X									
SP	Safeway Inc		X		05/27/03	X									
SP	Safeway Inc		X		05/28/03	X									
SP	Safeway Inc		X		05/29/03	X									
SP	Safeway Inc		X		05/30/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	SBC Communications Inc		X		06/16/03	X									
SP	SBC Communications Inc		X		06/17/03	X									
SP	SBC Communications Inc		X		09/03/03	X									
SP	SBC Communications Inc		X		09/11/03	X									
SP	Southtrust Corp		X		04/23/03	X									
SP	Southtrust Corp		X		06/27/03	X									
SP	Southtrust Corp (8 Transactions)		X		9/11 - 10/6/03	X									
SP	Southtrust Corp		X		10/07/03	X									
SP	Southtrust Corp		X		10/08/03	X									
SP	Starwood Hotels & Resorts Worldwide Inc		X		09/18/03	X									
SP	Starwood Hotels & Resorts Worldwide Inc		X		09/19/03	X									
SP	Syngenta AG Spon ADR		X		04/23/03	X									
SP	Syngenta AG Spon ADR (6 Transactions)		X		4/25 - 8/5/03	X									
SP	Texas Instruments Inc (6 Transactions)		X		5/5 - 10/6/03	X									
SP	Texas Instruments Inc		X		08/25/03	X									
SP	Texas Instruments Inc		X		10/03/03	X									
SP	Texas Instruments Inc		X		10/07/03	X									
SP	Texas Instruments Inc		X		10/21/03	X									
SP	Texas Instruments Inc		X		10/22/03	X									
SP	Tribune Co		X		10/29/03	X									
SP	Tribune Co		X		12/31/03	X									
SP	TXU Corp		X		12/23/03	X									
SP	Wachovia Corp		X		05/19/03	X									
SP	Wachovia Corp		X		06/19/03	X									
SP	Wachovia Corp		X		06/20/03	X									
SP	Wachovia Corp		X		06/23/03	X									
SP	Wachovia Corp		X		06/24/03	X									
SP	Wachovia Corp		X		08/12/03	X									
SP	Wachovia Corp		X		08/13/03	X									
SP	Wachovia Corp		X		08/14/03	X									
SP	Ft Wayne Ind Redev 3% 2/1/09	X			05/08/03					X					
SP	Garland Tx COPS 4.125% 2/15/16	X			04/16/03					X					
SP	Lewisville Tx Ind Sch Dist GO 3.625% 8/15/10	X			04/24/03					X					
SP	Noblesville Ind Redev Auth Lea Rev 4% 7/15/12	X			04/28/03					X					
SP	Oklahoma Dev Fin Aut Rev 4% 7/1/14	X			04/24/03					X					
SP	State of CA GO 5% 2/1/17	X			04/25/03					X					
SP	State of NY GO 3.5% 4/15/11	X			05/02/03					X					

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

	Asset	Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Travis Tx GO 4.3% 3/1/18	X			04/25/03					X					
SP	West Allis West Milwaukee ETAL GO 4% 4/1/13	X			05/13/03					X					
SP	Western Wash Univ Wash Revs 4% 10/1/15	X			04/28/03					X					
SP	Accredited Home Lendrs Hldg Co	X			06/13/03	X									
SP	Accredited Home Lendrs Hldg Co (6 Transactions)	X			7/1 - 8/28/03	X									
SP	Accredited Home Lendrs Hldg Co	X			08/05/03	X									
SP	Action Performance Companies	X			04/15/03	X									
SP	Action Performance Companies	X			05/06/03	X									
SP	Action Performance Companies	X			11/06/03	X									
SP	Administaff Inc	X			04/15/03	X									
SP	Aftermarket Technology Corp	X			05/01/03	X									
SP	Aftermarket Technology Corp	X			05/15/03	X									
SP	Aftermarket Technology Corp (5 Transactions)	X			5/19 - 12/5/03	X									
SP	America Service Grp	X			04/15/03	X									
SP	America Service Grp	X			04/21/03	X									
SP	American Fisl Rlty Tr	X			06/25/03	X									
SP	American Fisl Rlty Tr	X			08/27/03	X									
SP	Americas Car Mart Inc	X			06/06/03	X									
SP	Americredit Corp	X			04/15/03	X									
SP	AMN Healthcare Services Inc	X			05/19/03	X									
SP	AMN Healthcare Services Inc	X			05/21/03	X									
SP	AMN Healthcare Services Inc	X			05/28/03	X									
SP	AMN Healthcare Services Inc	X			10/20/03	X									
SP	AMN Healthcare Services Inc	X			10/24/03	X									
SP	Annaly Mtg Mgmt Inc	X			04/15/03	X									
SP	Anworth Mortgage Asset Corp	X			08/13/03	X									
SP	Anworth Mortgage Asset Corp	X			08/28/03	X									
SP	Anworth Mortgage Asset Corp	X			09/18/03	X									
SP	Anworth Mortgage Asset Corp	X			09/30/03	X									
SP	Anworth Mortgage Asset Corp	X			10/20/03	X									
SP	Anworth Mortgage Asset Corp	X			11/11/03	X									
SP	Apria Healthcare Grp	X			04/15/03	X									
SP	Apria Healthcare Grp	X			06/23/03	X									
SP	Arkansas Best Corp	X			04/15/03	X									
SP	Bally Total Fitness Hldg Corp	X			04/15/03	X									
SP	Beazer Homes USA Inc	X			04/15/03	X									
SP	Big 5 Sporting Goods Corp	X			04/15/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Big 5 Sporting Goods Corp	X			44/29/3	X									
SP	Big 5 Sporting Goods Corp	X			05/02/03	X									
SP	Capital Automotive REIT	X			04/15/03	X									
SP	Casual Male Retail Grp Inc	X			09/23/03	X									
SP	Casual Male Retail Grp Inc	X			11/06/03	X									
SP	Casual Male Retail Grp Inc	X			11/12/03	X									
SP	CATO Corporation Cmn	X			04/15/03	X									
SP	Centene Corp	X			04/15/03	X									
SP	Charles River Associates Inc	X			04/15/03	X									
SP	Chattem Inc	X			09/11/03	X									
SP	Chattem Inc	X			09/24/03	X									
SP	Chattem Inc	X			10/17/03	X									
SP	Coinstar Inc	X			04/15/03	X									
SP	Coinstar Inc	X			07/10/03	X									
SP	Commercial Cap Bancorp Inc	X			05/22/03	X									
SP	Commercial Cap Bancorp Inc	X			06/06/03	X									
SP	Commercial Cap Bancorp Inc	X			06/17/03	X									
SP	Copart Inc	X			04/15/03	X									
SP	Core Laboratories NV	X			04/15/03	X									
SP	Core Laboratories NV	X			10/16/03	X									
SP	Cypress Semiconductor Corp	X			04/15/03	X									
SP	Danka Business Systems PLC Spon ADR	X			09/09/03	X									
SP	Direct General Corp (3 Transactions)	X			8/13 - 11/25/03	X									
SP	Direct General Corp	X			08/18/03	X									
SP	Dollar Tree Stores Inc	X			04/15/03	X									
SP	Excel Technology Inc	X			04/15/03	X									
SP	Fidelity National Financl Inc	X			04/15/03	X									
SP	Fidelity National Financl Inc	X			10/09/03	X									
SP	Fidelity National Financl Inc	X			11/07/03	X									
SP	Fidelity National Financl Inc	X			11/11/03	X									
SP	Finish Line Inc	X			04/15/03	X									
SP	First Cmnty Bancorp CA	X			04/15/03	X									
SP	First State Bancorporation	X			04/15/03	X									
SP	Franklin Bank Corp	X			12/19/03	X									
SP	Friedman Billings Ramsey Gro Ord Cmn	X			04/15/03	X									
SP	Friedmans Inc	X			04/15/03	X									
SP	Friedmans Inc	X			05/06/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Genesco Inc	X			04/15/03	X									
SP	Global Imaging Services Inc	X			04/15/03		X								
SP	Group 1 Automotive Inc	X			04/15/03	X									
SP	Group 1 Automotive Inc	X			10/16/03	X									
SP	Hanover Capital Mtg Hldngs Inc	X			08/14/03	X									
SP	Hanover Capital Mtg Hldngs Inc	X			08/18/03	X									
SP	Health Care Property Inv Inc	X			04/15/03	X									
SP	Heico Corp	X			04/28/03	X									
SP	Heico Corp	X			04/29/03	X									
SP	Hooker Furniture Corp	X			07/07/03	X									
SP	Hub International Ltd	X			04/15/03	X									
SP	Hub International Ltd	X			10/17/03	X									
SP	Hub International Ltd	X			12/01/03	X									
SP	Integrated Alarm Services Grp	X			12/05/03	X									
SP	Integrated Device Tech Inc	X			04/15/03	X									
SP	Jarden Corp	X			09/17/03	X									
SP	Jarden Corp	X			10/23/03	X									
SP	Kadant Inc	X			04/15/03	X									
SP	Keystone Automotive Inds Inc	X			04/15/03	X									
SP	Lithia Motors Inc	X			04/15/03	X									
SP	LNR Property Corp	X			04/15/03	X									
SP	Lone Star Steakhouse Saloon	X			04/15/03	X									
SP	LSI Logic Corp	X			04/15/03	X									
SP	Luminent Mortgage Capital Inc	X			12/19/03	X									
SP	MDC Holdings Inc	X			04/15/03	X									
SP	Marlaemax Inc	X			04/15/03	X									
SP	Maxwell Shoe Co Inc	X			04/15/03	X									
SP	MCG Capital Corp	X			04/15/03	X									
SP	MCG Capital Corp	X			08/28/03	X									
SP	Meritage Corporation	X			06/16/03	X									
SP	Meritage Corporation	X			08/26/03	X									
SP	MFA Mortgage Investments Inc	X			08/06/03	X									
SP	MFA Mortgage Investments Inc	X			08/28/03	X									
SP	MFA Mortgage Investments Inc	X			09/30/03	X									
SP	MFA Mortgage Investments Inc	X			10/22/03	X									
SP	Micrel Inc	X			04/15/03	X									
SP	Mobile Mini Inc	X			04/15/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Mobile Mini Inc	X			12/08/03	X									
SP	Mobile Mini Inc (3 Transactions)	X			6/27 - 12/9/03	X									
SP	Molina Healthcare Inc	X			07/02/03	X									
SP	Molina Healthcare Inc	X			08/19/03	X									
SP	Molina Healthcare Inc	X			11/06/03	X									
SP	Monro Muffler Brake Inc	X			10/17/03	X									
SP	Movie Gallery Inc	X			04/15/03	X									
SP	Movie Gallery Inc	X			12/10/03	X									
SP	NVR Inc	X			04/15/03	X									
SP	NVR Inc	X			07/10/03	X									
SP	Nanometrics Inc	X			04/15/03	X									
SP	Nara Bancorp Inc	X			04/15/03	X									
SP	Nationwide Health Properties Inc	X			04/15/03	X									
SP	Natl Semiconductor Corp	X			04/15/03	X									
SP	Navigant Internatl Inc	X			04/15/03	X									
SP	Navigant Internatl Inc	X			07/28/03	X									
SP	NBTY Inc	X			04/15/03	X									
SP	NBTY Inc (6 Transactions)	X			4/17 - 12/12/03	X									
SP	NBTY Inc	X			04/23/03	X									
SP	Newcastle Invt Corp	X			05/28/03	X									
SP	Newcastle Invt Corp	X			06/09/03	X									
SP	Newcastle Invt Corp	X			07/16/03	X									
SP	Newcastle Invt Corp	X			07/24/03	X									
SP	Newcastle Invt Corp	X			05/20/03	X									
SP	Nextel Partners Inc	X			05/28/03	X									
SP	Nextel Partners Inc	X			06/02/03	X									
SP	Nextel Partners Inc	X			06/10/03	X									
SP	Nextel Partners Inc	X			12/12/03	X									
SP	Novastar Financial Inc	X			04/15/03	X									
SP	Nu Horizons Electronic Corp	X			05/08/03	X									
SP	O'Charleys Inc	X			10/21/03	X									
SP	O'Charleys Inc	X			04/15/03	X									
SP	O'Reilly Automotive	X			12/12/03	X									
SP	Orient-Express Hotels Ltd	X			09/11/03	X									
SP	Orient-Express Hotels Ltd	X			11/21/03	X									
SP	Orient-Express Hotels Ltd	X			09/10/03	X									
SP	Pacificare Health Systems Inc	X			09/17/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
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		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$5,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Pacificare Health Systems Inc	X			04/15/03	X									
SP	Perlcam Semiconductor Corp	X			10/16/03	X									
SP	Plains Expl & Prod Co LP	X			08/26/03	X									
SP	Rainbow Rentals Inc	X			04/15/03	X									
SP	RC2 Corp	X			08/01/03	X									
SP	RC2 Corp	X			06/10/03	X									
SP	Redwood Trust Inc	X			06/12/03	X									
SP	Redwood Trust Inc	X			06/19/03	X									
SP	Redwood Trust Inc	X			08/05/03	X									
SP	Redwood Trust Inc	X			05/23/03	X									
SP	Rehabcare Group Inc	X			04/15/03	X									
SP	Remedytemp Inc	X			04/15/03	X									
SP	Rent-A-Center Inc	X			04/15/03	X									
SP	Sanmina-SCI Corp	X			04/15/03	X									
SP	Saxon Capital Inc	X			04/15/03		X								
SP	School Specialty Inc	X			04/15/03	X									
SP	School Specialty Inc	X			05/12/03	X									
SP	School Specialty Inc	X			10/20/03	X									
SP	School Specialty Inc	X			12/12/03	X									
SP	Scottish Annty & Life Hdgs Ltd	X			12/11/03	X									
SP	Shaw Group Inc	X			11/19/03	X									
SP	SM&A Cmn	X			04/15/03	X									
SP	SM&A Cmn (5 Transactions)	X			4/29 - 9/2/03	X									
SP	Sola Intersatl Inc	X			11/19/03	X									
SP	Sonic Automotive Inc	X			04/15/03	X									
SP	SPSS Inc	X			04/15/03	X									
SP	Sunrise Senior Living Inc	X			04/15/03	X									
SP	Supertex Inc	X			04/15/03	X									
SP	Supreme Industries Inc	X			08/27/03	X									
SP	TCF Financial Corp	X			04/15/03	X									
SP	TCF Financial Corp (3 Transactions)	X			5/2 5/20/03	X									
SP	TCF Financial Corp	X			05/08/03	X									
SP	Technology Investment Cap Corp	X			11/21/03	X									
SP	Thor Industries Inc	X			04/15/03	X									
SP	Toll Brothers Inc	X			04/15/03	X									
SP	Transport Corp of America Inc (3 Transactions)	X			5/8 - 11/4/03	X									
SP	US Physical Therapy Inc	X			05/15/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	US Physical Therapy Inc	X			09/23/03	X									
SP	United Panam Financial Corp (6 Transactions)	X			5/23 - 12/12/03	X									
SP	United Panam Financial Corp	X			11/10/03	X									
SP	United Panam Financial Corp	X			11/11/03	X									
SP	United Panam Financial Corp	X			12/11/03	X									
SP	United Rentals Inc	X			04/15/03		X								
SP	USA Truck Inc	X			04/15/03	X									
SP	Vitran Corp	X			12/23/03	X									
SP	Washington Federal Inc	X			04/15/03	X									
SP	Washington Federal Inc	X			07/21/03	X									
SP	Whitehall Jewellers Inc	X			04/15/03	X									
SP	Winnebago Industries Inc	X			04/15/03	X									
SP	World Accep Corp	X			04/15/03	X									
SP	Yellow Corp	X			04/15/03	X									
SP	Administaff Inc (4 Transactions)		X		5/8 - 11/25/03	X									
SP	Administaff Inc		X		12/04/03	X									
SP	Americredit Corp		X		07/10/03	X									
SP	Annaly Mtg Mgmt Inc		X		09/02/03	X									
SP	Asworth Mortgage Asset Corp		X		12/17/03	X									
SP	Apria Healthcare Grp		X		11/14/03	X									
SP	Arkansas Best Corp		X		07/24/03	X									
SP	Bally Total Fitness Hldg Corp		X		05/08/03	X									
SP	Beazer Homes USA Inc		X		06/10/03	X									
SP	Big 5 Sporting Goods Corp		X		11/25/03	X									
SP	Capital Automotive REIT (3 Transactions)		X		7/15 - 8/7/03	X									
SP	Centene Corp		X		07/09/03	X									
SP	Centene Corp		X		07/29/03	X									
SP	Centene Corp		X		08/18/03	X									
SP	Charles River Associates Inc		X		09/11/03	X									
SP	Commercial Cap Bancorp Inc		X		11/05/03	X									
SP	Copart Inc		X		09/15/03	X									
SP	Core Laboratories NV		X		12/18/03	X									
SP	Cypress Semiconductor Corp		X		06/27/03	X									
SP	Cypress Semiconductor Corp (5 Transactions)		X		7/9 - 11/4/03	X									
SP	Cypress Semiconductor Corp		X		12/08/03	X									
SP	Danka Business Systems PLC Spon ADR		X		09/30/03	X									
SP	Dollar Tree Stores Inc		X		08/21/03	X									

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JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
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		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Dollar Tree Stores Inc		X		09/15/03	X									
SP	Finish Line Inc		X		08/18/03	X									
SP	Finish Line Inc		X		05/21/03	X									
SP	Finish Line Inc		X		10/02/03	X									
SP	Finish Line Inc		X		11/19/03	X									
SP	First State Bancorporation		X		11/04/03	X									
SP	First State Bancorporation		X		11/13/03	X									
SP	Friedman Billings Ramsey Gro Ord Cmn (4 Transactions)		X		6/9 - 12/15/03	X									
SP	Friedman Billings Ramsey Gro Ord Cmn		X		08/21/03	X									
SP	Friedman Billings Ramsey Gro Ord Cmn		X		12/19/03	X									
SP	Friedman's Inc		X		09/08/03	X									
SP	Friedman's Inc		X		11/12/03	X									
SP	Friedman's Inc		X		11/18/03	X									
SP	Friedman's Inc		X		11/20/03	X									
SP	Genesco Inc		X		07/31/03	X									
SP	Global Imaging Services Inc		X		07/22/03	X									
SP	Global Imaging Services Inc		X		08/28/03	X									
SP	Global Imaging Services Inc		X		11/07/03	X									
SP	Health Care Property Inv Inc		X		04/25/03	X									
SP	Health Care Property Inv Inc (5 Transactions)		X		4/29 - 12/19/03	X									
SP	Hooker Furniture Corp		X		12/19/03	X									
SP	Integrated Device Tech Inc		X		12/10/03	X									
SP	Kadant Inc		X		05/01/03	X									
SP	Kadant Inc		X		05/09/03	X									
SP	Kadant Inc		X		05/22/03	X									
SP	Kadant Inc		X		06/10/03	X									
SP	Keystone Automotive Inds Inc		X		09/18/03	X									
SP	Lithia Motors Inc		X		11/04/03	X									
SP	LNR Property Corp		X		06/11/03	X									
SP	LNR Property Corp		X		06/30/03	X									
SP	LNR Property Corp		X		09/11/03	X									
SP	Lone Star Steakhouse Saloon		X		09/17/03	X									
SP	LSI Logic Corp		X		09/22/03	X									
SP	Marinemax Inc		X		06/26/03	X									
SP	Marinemax Inc (3 Transactions)		X		7/9 - 11/25/03	X									
SP	Marinemax Inc		X		09/19/03	X									
SP	Marinemax Inc		X		11/07/03	X									

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Asset		Type of Transaction			Date	Amount of Transaction									
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		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	Maxwell Shoe Company Inc (7 Transactions)		X		7/14 - 11/21/03	X									
SP	Micrel Inc		X		05/06/03	X									
SP	Micrel Inc		X		11/17/03	X									
SP	Molina Healthcare Inc		X		10/03/03	X									
SP	Nanometrics Inc		X		07/01/03	X									
SP	Nara Bancorp Inc		X		07/09/03	X									
SP	Nara Bancorp Inc		X		09/08/03	X									
SP	Nationwide Health Properties Inc		X		11/06/03	X									
SP	Nationwide Health Properties Inc		X		11/19/03	X									
SP	Nationwide Health Properties Inc		X		11/24/03	X									
SP	Natl Semiconductor Corp		X		05/13/03	X									
SP	Nextel Partners Inc		X		07/16/03	X									
SP	O'Reilly Automotive		X		08/21/03	X									
SP	O'Reilly Automotive		X		11/03/03	X									
SP	Pericom Semiconductor Corp		X		06/16/03	X									
SP	Pericom Semiconductor Corp		X		06/18/03	X									
SP	RC2 Corp		X		10/09/03	X									
SP	Remedytemp Inc (4 Transactions)		X		6/6 - 10/3/03	X									
SP	Rent-A-Center Inc		X		04/16/03	X									
SP	Rent-A-Center Inc		X		09/16/03	X									
SP	Sanmina-SCI Corp		X		06/27/03	X									
SP	Sanmina-SCI Corp		X		07/02/03	X									
SP	Sanmina-SCI Corp		X		07/28/03	X									
SP	Sanmina-SCI Corp		X		09/03/03	X									
SP	Saxon Capital Inc		X		10/14/03	X									
SP	School Specialty Inc		X		07/17/03	X									
SP	SPSS Inc		X		10/29/03	X									
SP	Sunrise Senior Living Inc		X		05/20/03	X									
SP	Sunrise Senior Living Inc		X		06/11/03	X									
SP	Sunrise Senior Living Inc		X		06/11/03	X									
SP	Sunrise Senior Living Inc		X		11/05/03	X									
SP	Sunrise Senior Living Inc		X		12/19/03	X									
SP	Thor Industries Inc (2 Transactions)		X		6/9 & 10/20/03	X									
SP	United Rentals Inc		X		04/28/03	X									
SP	United Rentals Inc (8 Transactions)		X		5/5 - 10/29/03	X									
SP	United Rentals Inc		X		05/06/03	X									
SP	United Rentals Inc		X		05/30/03	X									

JANE HARMAN
SCHEDULE IV ATTACHMENT
JANE HARMAN 25 YEAR GRANTOR TRUST - MANAGED ACCOUNTS

Asset		Type of Transaction			Date	Amount of Transaction									
						B	C	D	E	F	G	H	I	J	K
		Purchase	Sale	Exchange	(MO/DAY/YR)	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,001-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,00	$25,000,001-$50,000,0	Over $50,000,000
SP	United Rentals Inc		X		06/05/03	X									
SP	United Rentals Inc		X		06/26/03	X									
SP	United Rentals Inc		X		07/21/03	X									
SP	Winnebago Industries Inc (4 Transactions)		X		4/25 - 11/4/03	X									
SP	Winnebago Industries Inc		X		05/02/03	X									
SP	Winnebago Industries Inc		X		07/02/03	X									
SP	Winnebago Industries Inc		X		12/04/03	X									
SP	World Accep Corp		X		05/23/03	X									
SP	World Accep Corp		X		09/17/03	X									
SP	Yellow Corp		X		04/15/03	X									
SP	Yellow Corp (3 Transactions)		X		4/16 - 4/21/03	X									
SP	Yellow Corp		X		11/14/03	X									
SP	Julius Baer Int'l Equity	X			12/30/03	X									

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 JUN -2 PM 12: 22
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

MELISSA A. HART
(Full Name)
1508 LONGWORTH HOB
(Mailing Address)
WASHINGTON, DC 20515
Daytime Telephone: 202-225-2565

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 04	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Melissa A. Hart	5/31/04

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name MELISSA A. HART

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Examples:	SP	Mega Corp Stock	Simon & Schuster	1st Bank of Paducah, KY accounts	A None	B [illegible]	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L [illegible]	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II [illegible]	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VI [illegible]	VII $15,001 – $50,000	VIII [illegible]	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	P, S, E
										X								X																		P
				Indefinite																				Royalties									X			
											X									X									X							
	PA SERS RETIREMENT FUND							X																	X											
	AMERICAN FUNDS IRA								X																X											
	DOLLAR BANK								X											X						X										
	MML EQUITY							X																	X											
	OPPENHEIMER AGG. GROWTH							X																	X											
	OPPENHEIMER GLOBAL SEC							X																	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MELISSA A. HART

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	OPPENHEIMER STRATEGIC BOND			X																	X											
	CPA GROUP EXTENDED MKT. FUND			X																	X											
	CPA GROUP US TACTICAL ASSETS			X																	X											
	BAUSCH & LOMB, INC.			X										X								X										
	ALLNC BRNSTN MNY RSV ATL		X											X								X										
	CONCUR TECHNOLOGIES			X																	X											
	II-VI, INC.				X																X											
	ANSOFT, INC.			X										X								X										
	AVAYA, INC.		X											X								X										
	COMCAST CORP.			X										X								X										
	DEL MONTE FOODS CO.		X											X								X										
	FREEMARKETS, INC.			X										X								X										P
	GENERAL ELECTRIC CO.			X										X										X								
	HJ HEINZ CO			X										X									X									
	LUCENT TECHNOLOGIES, INC.		X											X							X											
	MEDTRONIC, INC.			X										X									X									
	MICROSOFT CORP.			X										X										X								P
	RESPIRONICS, INC.			X													X								X							S
	RMA MONEY MKT.			X												X							X	X								P, S
	UBS BANK USA DEP. ACCT.		X													X							X									P
	PA ST SER 2 RF MUNI			X										X										X								
	GMAC ZERO CORP. BOND			X												X					X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name MELISSA A. HART

Page 4 of 7

* SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	AT&T CORP.		X											X			X					X	X									E
	AGERE SYSTEMS		X														X			Halpwood		X											E

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Name MELISSA A. HART | Page 5 of 7

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
	FREEMARKETS INC COMMON STOCK	X			12/3/03	X									
	MICROSOFT, INC. COMMON STOCK	X			4/1/03	X									
	RESPIRONICS, INC COMMON STOCK		X		12/8/03	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
RIPON SOCIETY - CONFERENCE SPEAKER	8/8-8/15	PITTSBURGH, PA - LONDON - PGH.	Y	Y	N	N
NASDAQ CONF. SPEAKER	3/29-3/31	COLUMBIA S.C. - MIAMI - D.C.	Y	Y	N	N
NYSE, MTGS	5/1-5/2	DC - NY - PITTSBURGH	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE UNCOMP. NON-PROFIT	WASHINGTON & JEFFERSON COLLEGE
TRUSTEE UNCOMP. NON-PROFIT	UNIVERSITY OF PITTSBURGH
TRUSTEE UNCOMP. NON-PROFIT	COMMUNITY COLLEGE OF ALLEGHENY COUNTY
DIRECTOR UNCOMP. NON-PROFIT	VIETNAM VETERANS LEADERSHIP PROGRAM
DIRECTOR UNCOMP. NON-PROFIT	PITTSBURGH FILM OFFICE
DIRECTOR UNCOMP. NON-PROFIT	PITTSBURGH BALLET THEATRE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 14 AM 11:52
HAND DELIVERED
5
MC (Office Use Only)

J. Dennis Hastert (Full Name)
H-232, The Capitol (Mailing Address)
Washington DC 20515
202.225.0600 Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: IL District: 14	☐ Officer or Employee	Employing Office:
Report Type	☐ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dennis Hastert	5-14-04

Name J. Dennis Hastert | Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Illinois, Yorkville School District #115	Spouse Pension	NA
	State of Illinois Pension Fund (Former State Legislator)	Legislative Pension	28,567

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
			A None; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000	DIVIDENDS; INTEREST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income): Royalties	I None; IV $1,001 – $2,500; VI $5,001 – $15,000	P
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock			
			indefinite			
			1st Bank of Paducah, KY accounts			
JT	Yorkville Nat'l Bank Personal Account		D $15,001 – $50,000	INTEREST	II $201 – $1,000	
	Farm Account		D $15,001 – $50,000	INTEREST	II $201 – $1,000	
	Optimum Account		D $15,001 – $50,000	INTEREST	III $2,501 – $5,000	Opened new acct in 2003

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (if needed)

Name J. Dennis Hastert | Page 4 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 - $1,000; C $1,001 - $15,000; D $15,001 - $50,000; E $50,001 - $100,000; F $100,001 - $250,000; G $250,001 - $500,000; H $500,001 - $1,000,000; I $1,000,001 - $5,000,000; J $5,000,001 - $25,000,000; K $25,000,001 - $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 - $200; III $201 - $1,000; IV $1,001 - $2,500; V $2,501 - $5,000; VI $5,001 - $15,000; VII $15,001 - $50,000; VIII $50,001 - $100,000; IX $100,001 - $1,000,000; X $1,000,001 - $5,000,000; XI Over $5,000,000	P, S, E
	Congressional Federal Credit Union	D	INTEREST	II	
	Northwestern Mutual Life IRA	C	DIVIDENDS; INTEREST; CAPITAL GAINS	I	
SP	Northwestern Mutual Life IRA	C	DIVIDENDS; INTEREST; CAPITAL GAINS	I	
	Bear Stearns Mutual Fund	E		I	
	Regnery Publishing	A	Royalties	I	
JT	Townhouse Property (Washington, DC)		RENT	VI	

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B ~~$10,001–$15,000~~	C $15,001–$50,000	D ~~$50,001–$100,000~~	E $100,001–$250,000	F ~~$250,001–$500,000~~	G $500,001–$1,000,000	H ~~$1,000,001–$5,000,000~~	I $5,000,001–$25,000,000	J ~~$25,000,001–$50,000,000~~	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Alliance Mortgage	Mortgage DC Townhouse			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

4

LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 4:38
U.S. HOUSE OF REPRESENTATIVES

MC

(Office Use Only)

The Honorable Alcee Lamar Hastings
(Full Name)

2235 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-1313
Daytime Telephone:

Filer Status ☑ Member of the U.S. House of Representatives — State: FL District. 23 ☐ Officer Or Employee — Employing Office:

Report Type ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? Yes ☑ No ☐
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? Yes ☐ No ☑
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? Yes ☑ No ☐
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? Yes ☐ No ☑
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? Yes ☑ No ☐
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes ☐ No ☑
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? Yes ☐ No ☑
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes ☐ No ☑

Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes ☐ No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Alcee L. Hastings	5/13/04

1878

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name The Honorable Alcee Lamar Hastings

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
Wright Pattman Credit Union	$1,001 - $15,000	INTEREST	$1 - $200	NA

SCHEDULE V - LIABILITIES

Name The Honorable Alcee Lamar Hastings

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Robert Catz	Legal Fees	$500,001 - $1,000,000
	Terrance Anderson	Legal Fees	$1,000,001 - $5,000,000
	Patricia Williams	Legal Fees	$500,001 - $1,000,000
	Karr and McClan	Legal Fees	$100,001 - $250,000
	Mark McDonald	Legal Fees	$15,001 - $50,000
	Lewis Meyers	Legal Fees	$15,001 - $50,000
	Sun Trust Banks, Inc.	Mortgage on 8528 Longacre Drive, Miramar, FL	$250,001 - $500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name The Honorable Alcee Lamar Hastings

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Ebony Scholars Achievers Program	November 14-15	Wash., DC-St. Petersburg, FL-Miami, FL	Y	Y	N	N/A
American Turkish Council	Sept. 25-30	Wash., DC-Istanbul-Ankara-Wash., DC	Y	Y	N	N/A
Taipei Economic and Cultural Representative Office in the United States	Oct. 31-Nov. 1	Wash., DC-New York, NY-Miami, FL	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED
3
LEGISLATIVE RESOURCE CENTER
2004 MAY 13 PM 12:09
MC
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Doc HASTINGS
(Full Name)
P.O. Box K PASCO, WA 99302
(Mailing Address)
Daytime Telephone: 202-225-5816

Filer Status	[X] Member of the U.S. House of Representatives — State: WA District: 04	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Doc Hastings	5/12/04

1882

Name DOC HASTINGS | Page 2 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Examples:		Block A	Block B	Block C	Block D	Block E
SP, DC, JT		SP	Mega Corp Stock	Indefinite	Royalties		P
			Simon & Schuster				
			1st Bank of Paducah, KY accounts				
JT			COLUMBIA BASIN PAPER + SUPPLY TRUST – PETERSEN/HASTINGS	X (F)	X (Other Type of Income: RETIREMENT PLAN)	X (I)	
JT			YAKIMA FEDERAL – DEPOSIT	X (C)	X (INTEREST)	X (II)	
JT			CHASE – DEPOSIT	X (C)	X (INTEREST)	X (II)	
JT			BANK AMERICA – DEPOSIT	X (C)	X (INTEREST)	X (II)	
JT			CHAS SCHWAB – IRA	X (D)	X (DIVIDENDS)	X (I)	

Block B columns: A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000

Block C columns: DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)

Block D columns: I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000

Block E: P, S, E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DOC HASTINGS

Page 3 of 3

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	INST SELECT S&P 500		X					X				X						
	MATTHEWS / PACIFIC		X					X				X						
	SCHWAB INTL INDEX		X					X				X						
	SCHWAB SM CAP		X					X				X						
JT	VANGUARD GROUP		X					X				X						
	TOTAL INT'L INDEX		X					X				X						
	TOTAL ST MKT INDEX		X					X				X						

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THE HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 5:20
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

HAND DELIVERED

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

ROBERT CANNON HAYES
(Full Name)

P O BOX 2000
(Mailing Address)

Daytime Telephone: (704) 795-2000

CONCORD, NC 28026

Filer Status	[X] Member of the U.S. House of Representatives	State: NC District: 8	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert C. "Robin" Hayes	5/17/04

1885

Name ROBERT CANNON HAYES

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None / C $1,001 – $15,000 / E $50,001 – $100,000 / G $250,001 – $500,000 / I $1,000,001 – $5,000,000 / K $25,000,001 – $50,000,000	DIVIDENDS / INTEREST / EXCEPTED TRUST / Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None / III $201 – $1,000 / V $2,501 – $5,000 / VII $15,001 – $50,000 / IX $100,001 – $1,000,000 / XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock	X	X		P
	Simon & Schuster	Indefinite		Royalties	X
	1st Bank of Paducah, KY accounts		X		
	SEE ATTACHMENT				

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	C $15,001–$50,000	E $100,001–$250,000	G $500,001–$1,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		X			
	WACHOVIA BANK; ATLANTA, GA	COMMERCIAL LOAN - AIRPLANE			X		
	WACHOVIA BANK; ATLANTA, GA	COMMERICIAL LOAN		X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	THE PUBLIC GOVERNANCE INSTITUTE	2-28-03 TO 3-2-03	WASHINGTON, DC-GREENBRIER, WV ~~WASHINGTON,DC~~	Y	Y	Y	N
	AMERICAN ISRAEL EDUCATION FOUNDATION	8-23-03 TO 8-31-03	CHARLOTTE, NC TEL AVIV, ISRAEL CHARLOTTE, NC	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
MEMBER	ARCTIC SOUTHERN FARMS, LLC
PRESIDENT, DIRECTOR	MOUNT PLEASANT HOSIERY MILL, INC.
LIMITED PARTNER	LEMMON/ROSINSKI I, LP

SCHEDULE IX — AGREEMENTS NONE

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

ROBERT CANNON HAYES
ATTACHMENT TO SCHEDULE III-ASSETS AND "UNEARNED INCOME"

		VALUE OF ASSET										TYPE OF INCOME				AMOUNT OF INCOME										TRANSACTION
SP, DC, JT	ASSET AND/OR INCOME SOURCE	NONE	$1-$1,000	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,000-$500,000	$500,001-$1,000,000	$1,000,001-5,000,000	$5,000,001-25,000,000	$25,000,001-50,000,000	OVER $50,000,000	DIVIDEND	RENT	CAPITAL GAIN	OTHER	NONE	$1-$200	$201-$1,000	$1,001-$2,500	$2,501-$5,000	$5,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$1,000,000	$1,000,001-$5,000,000	OVER $5,000,000	P, S, E
	BERKSHIRE HATHAWAY B, STOCK			X														X										
	SOLFCTRON CP; STOCK			X														X										
	EMC CORP MASS; STOCK			X														X										
	GENUITY INC, CL A; STOCK	X																X										
	INTEL CORP, STOCK			X										X					X									
	JDS UNIPHASE, STOCK		X															X										
	MOTOROLA INC., STOCK			X															X									
	ORACLE CORP, STOCK			X														X										
	VIGNETTE CORP.; STOCK		X															X										
SP	ACTIVE ASSETS MONEY TRUST, MM			X															X									
SP	AMERICAN EXPRESS; STOCK			X															X									
SP	BB&T CORP., STOCK				X									X						X								
SP	CONOCO PHILLIPS INC.; STOCK				X									X						X								
SP	CORNING INC.; STOCK			X														X										
SP	FANNIE MAE, STOCK				X									X						X								
SP	INTEL CORP; STOCK			X															X									
SP	LANCER CP, STOCK			X														X										
SP	SYMBOL TECH; STOCK			X															X									
	SUNCO INC., STOCK			X																X								

1 of 2

ROBERT CANNON HAYES
ATTACHMENT TO SCHEDULE III-ASSETS AND "UNEARNED INCOME"

		VALUE OF ASSET										TYPE OF INCOME					AMOUNT OF INCOME										TRANSACTION
SP, DC, JT	ASSET AND/OR INCOME SOURCE	NONE	$1-$1,000	$1,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$250,000	$250,000-$500,000	$500,001-$1,000,000	$1,000,001-$5,000,000	$5,000,001-$25,000,000	$25,000,001-$50,000,000	OVER $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAIN	OTHER	NONE	$1-$200	$201-$1,000	$1,001-$2,500	$2,501-$5,000	$5,001-$15,000	$15,001-$50,000	$50,001-$100,000	$100,001-$1,000,000	$1,000,001-$5,000,000	OVER $5,000,000	P, S, E
	RICHFIELD PROPERTY, CULP ROAD RICHFIELD, NC 28137					X													X										
	WISCONSIN PROPERTY, CLINE ROAD BREED, WI					X													X										
	MOUNT PLEASANT HOSIERY MILL BLDG 1467 N MAIN ST, MT PLEASANT, NC														X								X (GROSS)						
	AIRPLANE, CONCORD, NC						X								X				X (NET)						X (GROSS)				
	MOUNT PLEASANT HOSIERY INC., STOCK, MT PLEASANT, NC					X													X										
	LEMMON/ROSINSKI LP			X												X				X									
	FIRST CHARTER NATL BANK, CD				X											X					X								
SP	FIRST CHARTER NATL BANK, CD			X												X					X								
	J. CLARY PHILLIPS	X (SUB-LEASE ENDED IN 2002)																	X										
JT	WACHOVIA CAP ACCOUNT (FORMERLY FIRST CLEARING CORP)					X															X								
SP	WACHOVIA CAP ACCOUNT (FORMERLY FIRST CLEARING CORP)					X									X					X									
	TRUST CA CANNON DTD 12-5-51 (SEE SCHEDULE III, ATTACHMENT A)								X																X				
	TRUST CA CANNON DTD 5-12-53 (SEE SCHEDULE III, ATTACHMENT B)																						X						
	TRUST CA CANNON (322) (SEE SCHEDULE III, ATTACHMENT C)											X														X			
	ARCTIC SOUTHERN FARMS, LLC	X (LAND OWNED BY TRUST)																	X										
	LOAN TO KEVIN SIMPSON CONCORD, NC			X (SALE OF REAL ESTATE FINANCED)																		X							

ROBERT CANNON HAYES

MAY 1, 2004

To Whom It May Concern:

Mr. Hayes earns a fraction of the income generated from these trusts. Securities and other assets held in these trusts are for the benefit of future owners, not Mr. Hayes.

SCHEDULE OF INVESTMENTS

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 12-5-51
PAGE 1 OF 3

ROBERT C HAYES TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/R C HAYES AND
W C CANNON JR U/IR/A WITH
C A CANNON DATED 12-5-51 #89

ACCT 1019854809
ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		CASH & EQUIVALENTS									
		PRINCIPAL CASH				0.0		0.00	0.00	0.00	0
		INCOME CASH				0.0		0.00	0.00	0.00	0
		TOTAL CASH			0	0.0		0.00	0.00	0.00	0
		TEMPORARY INVESTMENTS									
		EVERGREEN MUNICIPAL MONEY MARKET FUND CL I (FD #496)			973	1.1		86,149.27	86,149.27	3.19	0
		TOTAL CASH & EQUIVALENTS			973	1.1		86,149.27	86,149.27	3.19	0
		FIXED INCOME									
		MUNICIPALS									
100,000		FORSYTH CNTY NC G.O. BD DTD 09/01/2003 2.75% 03/01/2008	Aaa	09/04/03	2,750	2.7	102.08	100,464.05	102,081.00	3.78	1,617
100,000		NORTH CAROLINA ST BD DTD 3/1/97 SER A SEO (C 3/1/2007 @101) 5.2% 03/01/2009-2007	Aa1	03/05/1997	5,200	4.7	110.05	100,575.71	110,052.00	4.07	9,476
100,000		UNV NC SYS POOL- REV BD DTD 10/29/2003 OID SER B 3.1% 04/01/2010	Aaa	10/10/03	3,100	3.1	101.54	99,830.52	101,543.00	3.76	1,712
100,000		STANLY CNTY NC ND DTD 2/1/2001 (C 2/1/2011 @100.5) 4.6% 02/01/2012-2011	Aaa	01/23/01	4,600	4.2	108.54	101,901.69	108,540.00	4.02	6,638
50,000		CHARLOTTE NC BD DTD 8/1/98 OID PUB IMPT SER A (C 2/1/2008 @ 102) 4.75% 02/01/2013-2008	Aaa	07/14/1998	2,375	4.5	106.71	49,608.89	53,353.50	1.97	3,745
100,000		NEW HANOVER CNTY NC HOSP REV BD DTD 2/15/99 OID NEW HANOVER REGL MED CTR PJ (C 10/1/2009 @ 101) 4.75% 10/01/2014-2009	Aaa	02/19/1999	4,750	4.4	106.87	99,417.00	106,865.00	3.95	7,448
100,000		ORANGE CNTY N C BD DTD 4/1/2000 PUB IMPT (C 4/1/2010 @102) 5.3% 04/01/2015-2010	Aa1	04/04/00	5,300	4.7	111.65	100,000.00	111,648.00	4.13	11,648

SCHEDULE III, ATT. A

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 12-5-51
PAGE 2 OF 3

SCHEDULE OF INVESTMENTS

ROBERT C HAYES TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/R C HAYES AND
W C CANNON JR U/IR/A WITH
C A CANNON DATED 12-5-51 #89

ACCT 1019854809

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
150,000		WILSON CNTY N C BD DTD 4/1/2002 (C 4/1/2012 @ 101;P 4/1/2013) 5% 04/01/2017-2012	Aaa	03/13/02	7,500	4.6	107.84	150,627.00	161,761.50	5.98	11,135
50,000		NORTH CAROLINA ST BD DTD 03/01/2001 REV 5% 03/01/2018-2011	Aa1	03/07/01	2,500	4.4	114.40	50,339.00	57,200.50	2.12	6,862
		TOTAL MUNICIPALS			38,075	4.2		852,763.36	913,044.50	33.78	60,281
		EQUITIES									
		COMMON STOCKS									
		MATERIALS									
3,600		DU PONT E I DE NEMOURS & CO COM		01/20/1988	5,040	3.1	45.89	47,592.00	165,204.00	6.11	117,612
		CONSUMER STAPLES									
6,000		ALTRIA GROUP INC COM		01/20/1988	16,320	5.0	54.42	41,915.00	326,520.00	12.08	284,605
		CONSUMER DISCRETIONARY									
1,000		HOME DEPOT INC COM		01/18/01	280	0.8	35.49	44,935.00	35,490.00	1.31	9,445-
		INFORMATION TECHNOLOGY									
1,300		CISCO SYS INC COM		09/24/01	0	0.0	24.23	16,917.03	31,499.00	1.17	14,582
		ENERGY									
1,078		CHEVRONTEXACO CORP COM		03/09/1992	3,148	3.4	86.39	39,963.00	93,128.42	3.45	53,165
3,168		EXXON MOBIL CORP COM		09/22/1993	3,168	2.4	41.00	46,323.74	129,888.00	4.81	83,564
3,200		ROYAL DUTCH PETE CO NY REGISTRY SH PAR N GLDR 1.25		01/20/1988	4,678	2.8	52.39	43,732.00	167,648.00	6.20	123,916
		TOTAL ENERGY			10,994	2.8		130,018.74	390,664.42	14.45	260,646

SCHEDULE III, ATT. A

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 12-5-51
PAGE 3 OF 3

SCHEDULE OF INVESTMENTS

ROBERT C HAYES TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/R C HAYES AND
W C CANNON JR U/IR/A WITH
C A CANNON DATED 12-5-51 #89

ACCT 1019854809

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT NV	UNREAL GN/LS
		UTILITIES									
4,000		DUKE ENERGY COM		01/20/1988	4,400	5.4	20.45	45,195.00	81,800.00	3.03	36,605
		FINANCIALS									
6,500		AMERICAN INTL GRP INC COM		02/05/1985	1,690	0.4	66.28	21,392.33	430,820.00	15.94	409,428
2,400		FANNIE MAE COM		09/22/1993	4,320	2.4	75.06	47,079.00	180,144.00	6.66	133,065
6,100		HRPT PROPERTIES TRUST COM SH BEN INT		01/18/01	4,880	7.9	10.09	50,691.00	61,549.00	2.28	10,858
		TOTAL FINANCIALS			10,890	1.6		119,162.33	672,513.00	24.88	553,351
		TOTAL COMMON STOCKS			47,924	2.8		445,735.10	1,703,690.42	63.03	1,257,955
		TOTAL FUND			86,972	3.2		1,384,648.23	2,702,884.19	100.00	1,318,236

SCHEDULE III, ATT. A

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 5-12-53
PAGE 1 OF 4

SCHEDULE OF INVESTMENTS

ROBERT C. HAYES TRUST
WACHOVIA BANK, N.A.
CO-TTEE W/WINSLOW A H GALLOWAY
N C CANNON JR I/IR/A WITH
C A CANNON DTD 5-12-53 #108

ACCT 1019854916

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		CASH & EQUIVALENTS									
		PRINCIPAL CASH				0.0		0.00	0.00	0.00	0
		INCOME CASH				0.0		0.00	0.00	0.00	0
		TOTAL CASH			0	0.0		0.00	0.00	0.00	0
		TEMPORARY INVESTMENTS									
		EVERGREEN MUNICIPAL MONEY MARKET FUND CL I (FD #495)			1,564	1.1		138,379.72	138,379.72	0.93	0
		TOTAL CASH & EQUIVALENTS			1,564	1.1		138,379.72	138,379.72	0.93	0
		EQUITIES									
		COMMON STOCKS									
		INDUSTRIALS									
38,400		GENERAL ELEC CO COM		05/19/1961	30,720	2.6	30.98	25,839.69	1,189,632.00	8.00	1,163,792
6,000		PITNEY-BOWES INC COM		10/26/1984	7,200	3.0	40.62	23,899.87	243,720.00	1.64	219,820
		TOTAL INDUSTRIALS			37,920	2.6		49,739.56	1,433,352.00	9.64	1,383,612
		CONSUMER STAPLES									
24,000		ALTRIA GROUP INC COM		08/05/1985	65,280	5.0	54.42	83,975.00	1,306,080.00	8.79	1,222,105
6,000		NESTLE S A SPONSORED ADR REPSTG REG SH		03/09/1992	6,378	1.7	62.46	93,750.00	374,772.00	2.52	281,022
12,900		SARA LEE CORP COM		12/15/1987	9,675	3.5	21.71	56,147.25	280,059.00	1.88	223,912
		TOTAL CONSUMER STAPLES			81,333	4.1		233,872.25	1,960,911.00	13.19	1,727,039

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 5-12-53
PAGE 2 OF 4

SCHEDULE OF INVESTMENTS

ROBERT C. HAYES TRUST
WACHOVIA BANK, N.A.
CO-TTEE W/WINSLOW A H GALLOWAY
W C CANNON JR I/IR/A WITH
C A CANNON DTD 5-12-53 #108

ACCT 1019854916

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		CONSUMER DISCRETIONARY									
17,481		FORD MTR CO DEL COM		04/05/1984	6,992	2.5	16.00	42,976.28	279,696.00	1.88	236,720
2,000		HOME DEPOT INC COM		01/18/01	560	0.8	35.49	89,870.00	70,980.00	0.48	18,890-
18,000		MCDONALDS CORP COM		08/05/1985	7,200	1.6	24.83	66,350.00	446,940.00	3.01	380,590
8,309		VISTEON CORP COM		01/18/01	1,994	2.3	10.41	101,490.17	86,496.69	0.58	14,993-
		TOTAL CONSUMER DISCRETIONARY			16,746	1.9		300,686.45	864,112.69	5.95	583,426
		INFORMATION TECHNOLOGY									
2,600		CISCO SYS INC COM		09/24/01	0	0.0	24.23	33,722.00	62,998.00	0.42	29,276
3,200		INTEL CORP COM		09/24/01	256	0.2	32.05	67,520.00	102,560.00	0.69	35,060
		TOTAL INFORMATION TECHNOLOGY			256	0.2		101,242.00	165,558.00	1.11	64,316
		HEALTH CARE									
10,400		BRISTOL-MYERS SQUIBB CO COM		05/06/1982	11,648	3.9	28.60	36,316.87	297,440.00	2.00	261,123
1,688		MEDCO HEALTH SOLUTIONS INC COM		02/05/1985	0	0.0	33.99	2,039.55	57,375.12	0.39	55,336
14,000		MERCK & CO INC COM		02/05/1985	20,720	3.2	46.20	35,818.30	646,800.00	4.33	610,982
29,000		PFIZER INC COM		05/06/1982	19,720	1.9	35.33	34,941.27	1,024,570.00	6.89	989,629
1,040		ZIMMER HLDGS INC COM		05/06/1982	0	0.0	70.40	1,840.04	73,216.00	0.49	71,376
		TOTAL HEALTH CARE			52,088	2.5		110,956.03	2,099,401.12	14.13	1,988,445
		ENERGY									
9,600		ROYAL DUTCH PETR CO NY REGISTRY SH PAR N GLDR 1.25		03/22/1988	14,035	2.8	52.39	117,458.00	502,944.00	3.38	385,486
		UTILITIES									
5,200		DUKE ENERGY COM		12/13/02	5,720	5.4	20.45	100,071.92	106,340.00	0.72	6,268
		FINANCIALS									
14,236		AMERICAN INTL GRP INC COM		02/05/1985	3,701	0.4	66.28	46,852.49	943,562.08	6.35	896,710
3,843		CITIGROUP INC COM		04/05/1984	5,390	2.9	48.54	21,178.84	186,539.22	1.26	165,360
1,500		JEFFERSON-PILOT CORP COM		08/04/1993	1,980	2.6	50.65	22,817.78	75,975.00	0.51	53,157

SCHEDULE III, ATT. B

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 5-12-53
PAGE 3 OF 4

SCHEDULE OF INVESTMENTS

ROBERT C. HAYES TRUST
WACHOVIA BANK, N.A.
CO-TTEE W/WINSLOW A H GALLOWAY
W C CANNON JR I/IE/A WITH
C A CANNON DTD 5-12-53 #100

ACCT 1019854916

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		TOTAL FINANCIALS			11,061	0.9		90,849.11	1,206,076.30	8.12	1,115,227
		TOTAL COMMON STOCKS			219,159	2.6		1,104,875.32	8,358,695.11	56.25	7,253,820
		OTHER ASSETS & LIABILITIES									
		CONTRACT AND NOTES - UNSECURED									
		PROMISSORY NT DTD 10/9/99 FROM ROBERT C HAYES SECD BY LIFE INS CONN INS CO POL #24523461H 6% 10/09/1999			128,994	6.0		2,149,891.81	2,149,891.81	14.47	0
		REAL ESTATE									
1		CABIN ON 13,075+- ACRES, LAKE COUNTY, MINNESOTA		09/05/1990	0	0.0	18,610.89	18,610.89	18,610.89	0.13	0
1		40+- ACRES INCL 2 CABINS SE 1/4 OF SE 1/4, SECTION 7, TWP. 59 N., RANGE 10 WEST, LAKE CO., MN.		09/05/1990	600	2.8	21,634.50	22,351.03	21,634.50	0.15	717-
1		TIMBER LOCATED ON 13,075+- ACRES LAKE COUNTY MINNESOTA		02/27/1989	0	0.0	736,703.47	304,445.37	736,703.47	4.96	432,258
1		5 ACRES & HOUSE, 1975 HWY 73 EAST, CONCORD, NC CABARRUS CNTY (SED-IP)		08/21/1995	7,200	5.3	136,000.00	126,909.29	136,000.00	0.92	9,091
1		HOUSE & LOT, 49 BRAYS ISLAND, SHELDON, SC 29941		03/01/1999	36,000	4.1	879,330.00	151,752.50	879,330.00	5.92	727,578
1		13,022.90 +/- ACRES TIMBERLAND LAKE COUNTY, MINNESOTA		02/27/1989	0	0.0	2,421,900.00	393,395.38	2,421,900.00	16.30	2,028,505
		TOTAL REAL ESTATE			43,800	1.0		1,017,464.46	4,214,178.86	28.36	3,196,714
		LIABILITIES									
		LIAB:SPECIAL FACILITIES CHARGE AGREEMENT AND PROM NOTE RELATED TO THE SAND LAKE LINE-EXTENSION CONSTRUCTION LAKE CO MN			0	0.0		1.00-	1.00-	0.00-	0

SCHEDULE III, ATT. B

SCHEDULE OF INVESTMENTS

ROBERT CANNON HAYES
TRUST-CA CANNON
DATED 5-12-53
PAGE 4 OF 4

ROBERT C. HAYES TRUST
WACHOVIA BANK, N.A.
CO-TTEE W/WINSLOW A H GALLOWAY
W C CANNON JR I/IR/A WITH
C A CANNON DTD 5-12-53 #108

ACCT 1019854916

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT NV	UNREAL GN/LS
		ASSIGNMENT OF INCOME DTD 10/9/99 RE:PROMISSORY NT HELD IN THE ACCT			0	0.0		1.00-	1.00-	0.00-	0
		TOTAL LIABILITIES			0	0.0		2.00-	2.00-	0.00-	0
		TOTAL OTHER ASSETS & LIABILITIES			172,794	2.7		3,167,354.27	6,364,068.67	42.82	3,196,714
		TOTAL FUND			393,517	2.6		4,410,609.31	14,861,143.50	100.00	10,450,534

SCHEDULE III, ATT. B

SCHEDULE OF INVESTMENTS

ROBERT CANNON HAYES
TRUST-(322)
PAGE 1 OF 5

C A CANNON (322) TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/ RC HAYES, JR.,
R C HAYES, H C CRAWFORD &
W C CANNON JR FBO ROBERT C HAYES

ACCT 1013731712

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT NV	UNREAL GN/LS
		CASH & EQUIVALENTS									
		PRINCIPAL CASH				0.0		297.18-	297.18-	0.00-	0
		INCOME CASH				0.0		0.00	0.00	0.00	0
		TOTAL CASH			0	0.0		297.18-	297.18-	0.00-	0
		TEMPORARY INVESTMENTS									
		EVERGREEN MUNICIPAL MONEY MARKET FUND CL I (FD #496)			17,983	1.1		1,591,417.80	1,591,417.80	4.03	0
		TOTAL CASH & EQUIVALENTS			17,983	1.1		1,591,120.62	1,591,120.62	4.02	0
		FIXED INCOME									
		MUNICIPALS									
50,000		CATAWBA CNTY SCHOOL & COMMUNITY COLL BD DTD 6/1/94 BEO UT (C 6/1/2004 @ 100.5) 5.7% 06/01/2005-2004	Aa2	10/03/1996	2,850	5.6	102.38	50,544.61	51,190.50	0.13	646
100,000		CARY SAN SWR BD DTD 4/1/96 BEO UT N/C 5.2% 04/01/2006	Aaa	06/25/1999	5,200	4.8	107.99	101,578.51	107,989.00	0.27	6,410
250,000		MECKLENBURG CNTY N C PUB IMPT BD DTD 4/1/94 BEO UT (C 4/1/2004 @ 101) 5.4% 04/01/2006-2004	Aaa	03/16/1994	13,500	5.3	102.06	251,472.67	255,137.50	0.65	3,665
100,000		NORTH CAROLINA ST CLEAN WTR BD DTD 10/1/94 SER A BEO UT (C 6/1/2004 @ 101) 5.75% 06/01/2006-2004	Aa1	12/07/1994	5,750	5.6	102.90	97,949.34	102,899.00	0.26	4,950
50,000		NORTH CAROLINA ST BD DTD 3/1/97 SER A BEO (C 3/1/2007 @101) 5.2% 03/01/2009-2007	Aa1	03/05/1997	2,600	4.7	110.05	50,287.86	55,026.00	0.14	4,738
200,000		NORTH CAROLINA ST BD DTD 04/1/98 SER A BEO REOP @ 101.899 TO YLD 4.53% (C 04/1/2008 100) 4.75% 04/01/2009-2008	Aa1	03/18/1998	9,500	4.3	109.48	202,418.16	218,962.00	0.55	16,544

ROBERT CANNON HAYES
TRUST-(322)
PAGE 2 OF 5

SCHEDULE OF INVESTMENTS

C A CANNON (322) TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/ RC HAYES, JR,
R C HAYES, W C CRAWFORD &
W C CANNON JR FBO ROBERT C HAYES

ACCT 1013731712

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
300,000		NEW HANOVER CNTY N C GEN OBL UNLTD DTD 06/01/2001 4.25% 06/01/2016	Aa2	06/25/01	12,750	3.9	108.31	300,000.00	324,927.00	0.82	24,927
50,000		NORTH CAROLINA ST BD DTD 1/1/97 REO OID REOF @99.515 TO YLD 5.15% (C 6/1/2006 @ 102) 5.1% 06/01/2010-2006	Aa1	01/15/1997	2,550	4.7	109.27	49,793.73	54,633.00	0.14	4,839
500,000		BUNCOMBE CNTY N C GEN OBL UNLTD DTD 04/01/2001 4.3% 02/01/2011	Aa2	04/03/01	21,500	4.0	107.37	500,000.00	536,865.00	1.36	36,865
300,000		CHARLOTTE NC BD DTD 8/1/98 OID PUB IMPT SER A (C 2/1/2009 @ 102) 4.75% 02/01/2013-2009	Aaa	07/14/1998	14,250	4.5	106.71	297,653.38	320,121.00	0.81	22,468
500,000		NORTH CAROLINA ST BD DTD 03/01/2001 REV 4.75% 03/01/2013-2011	Aa1	03/07/01	23,750	4.3	109.30	509,835.87	546,690.00	1.38	36,854
400,000		CARY BD DTD 03/01/2001 GOB 5% 03/01/2014-2011	Aaa	03/18/02	20,000	4.5	110.33	411,628.89	441,304.00	1.12	29,675
400,000		GREENVILLE NC UTILS COMMN COMB ENTERPRISE SYS REV BD DTD 3/15/2000 OID SER A (C 3/1/2009 @101; P 3/1/2010) 5.3% 09/01/2014-2009	Aaa	03/30/00	21,200	4.8	109.82	396,766.77	439,288.00	1.11	42,521
400,000		ORANGE CNTY N C BD DTD 4/1/2000 PUB IMPT (C 4/1/2010 @102) 5.3% 04/01/2015-2010	Aa1	04/04/00	21,200	4.7	111.65	400,000.00	446,592.00	1.13	46,592
950,000		MECKLENBURG CNTY NC PUB IMPT GEN OBL UNLTD DTD 05/01/2001 5% 04/01/2016-2011	Aaa	01/03/02	47,500	4.6	109.32	952,010.00	1,038,559.00	2.63	86,549
400,000		CHARLOTTE STORM WTR FEE REV RFDG BD DTD 1/15/2002 (C 6/1/2012 @ 101; P 6/1/2013) 5.25% 06/01/2017-2012	Aa2	03/19/02	21,000	4.7	110.95	409,384.78	443,788.00	1.12	34,403
500,000		NORTH CAROLINA ST BD DTD 9/1/2000 GENERAL OBLIGATION OID 5.1% 09/01/2017-2010	Aa1	01/04/02	25,500	4.4	115.27	508,610.00	576,335.00	1.46	67,725
500,000		NORTH CAROLINA ST BD DTD 03/01/2001 REV 5% 03/01/2018-2011	Aa1	03/07/01	25,000	4.4	114.40	503,390.00	572,005.00	1.45	68,615
		TOTAL MUNICIPALS			295,500	4.5		5,993,324.57	6,532,111.00	16.52	538,786

SCHEDULE III, ATT. C

SCHEDULE OF INVESTMENTS

C A CANNON (322) TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/ RC HAYES, JR,
R C HAYES, H C CRAWFORD &
W C CANNON JR FBO ROBERT C HAYES

ACCT 1013731712

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

ROBERT CANNON HAYES
TRUST-(322)
PAGE 3 OF 5

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		EQUITIES									
		COMMON STOCKS									
		INDUSTRIALS									
120,000		GENERAL ELEC CO COM		03/28/1984	96,000	2.6	30.98	217,706.25	3,717,600.00	9.40	3,499,894
18,000		MASCO CORP COM		06/10/1985	11,520	2.3	27.41	159,075.00	493,380.00	1.25	334,305
20,000		PITNEY-BOWES INC COM		11/08/1984	24,000	3.0	40.62	82,000.00	812,400.00	2.05	730,400
16,000		3M CO COM		03/11/1987	21,120	1.6	85.03	242,001.44	1,360,480.00	3.44	1,118,479
7,500		UNION PAC CORP COM		06/13/1990	9,000	1.7	69.48	185,521.88	521,100.00	1.32	335,578
		TOTAL INDUSTRIALS			161,640	2.3		886,304.60	6,904,960.00	17.47	6,018,655
		MATERIALS									
4,200		DU PONT E I DE NEMOURS & CO COM		12/03/1987	5,880	3.1	45.89	53,350.50	192,738.00	0.49	139,388
9,240		SONOCO PRODS CO COM		10/07/1993	7,762	3.4	24.62	177,049.00	227,488.80	0.58	50,441
6,250		TEMPLE INLAND INC COM		06/13/1986	8,500	2.2	62.67	132,775.00	391,687.50	0.99	258,913
		TOTAL MATERIALS			22,142	2.7		363,173.50	811,914.30	2.05	448,741
		CONSUMER STAPLES									
36,000		ALTRIA GROUP INC COM		05/01/1986	97,920	5.0	54.42	181,397.40	1,959,120.00	4.96	1,777,723
2,200		KIMBERLY-CLARK CORP COM		12/13/02	2,992	2.3	59.09	103,488.00	129,998.00	0.33	26,510
20,000		NESTLE S A SPONSORED ADR REPSTG REG SH		08/02/1990	21,260	1.7	62.46	298,750.00	1,249,240.00	3.16	950,490
		TOTAL CONSUMER STAPLES			122,172	3 7		583,635.40	3,338,358.00	8.44	2,754,723
		CONSUMER DISCRETIONARY									
39,770		FORD MTR CO DEL COM		08/25/1983	15,908	2.5	16.00	84,585.75	636,320.00	1.61	551,734
3,700		HOME DEPOT INC COM		12/13/02	1,036	0.8	35.49	99,003.12	131,313.00	0.33	32,310
2,978		VISTEON CORP COM		08/25/1983	715	2.3	10.41	3,459.45	31,000.98	0.08	27,542

SCHEDULE III, ATT. C

SCHEDULE OF INVESTMENTS

C A CANNON (322) TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/ RC HAYES, JR,
R C HAYES, H C CRAWFORD &
N C CANNON JR FBO ROBERT C HAYES

ACCT 1013731712

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

ROBERT CANNON HAYES
TRUST-(322)
PAGE 4 OF 5

SHARES OR FACE AMOUNT	PLG CCD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT MV	UNREAL GN/LS
		TOTAL CONSUMER DISCRETIONARY			17,659	2.2		187,046.32	798,633.98	2.02	611,586
		INFORMATION TECHNOLOGY									
7,800		CISCO SYS INC COM		09/24/01	0	0.0	24.23	101,556.00	188,994.00	0.48	87,438
9,690		INTEL CORP COM		09/24/01	768	0.2	32.05	204,192.00	307,680.00	0.78	103,488
14,000		INTL BUSINESS MACHINES CORP COM		03/28/1984	8,960	0.7	92.68	266,152.20	1,297,520.00	3.28	1,031,368
11,400		MICROSOFT CORP COM		01/18/01	1,824	0.6	27.37	316,350.00	312,018.00	0.79	4,332-
		TOTAL INFORMATION TECHNOLOGY			11,552	0.5		888,250.20	2,106,212.00	5.33	1,217,962
		HEALTH CARE									
36,000		BRISTOL-MYERS SQUIBB CO COM		05/06/1982	40,320	3.9	28.60	125,712.25	1,029,600.00	2.60	903,888
2,713		MEDCO HEALTH SOLUTIONS INC COM		04/02/1971	0	0.0	33.99	1,700.47	92,216.87	0.23	90,514
22,500		MERCK & CO INC COM		04/02/1971	33,300	3.2	46.20	29,861.72	1,039,500.00	2.63	1,009,638
90,000		PFIZER INC COM		05/06/1982	61,200	1.9	35.33	108,438.42	3,179,700.00	8.04	3,071,262
3,600		ZIMMER HLDGS INC COM		05/06/1982	0	0.0	70.40	6,369.37	253,440.00	0.64	247,071
		TOTAL HEALTH CARE			134,820	2.4		272,082.23	5,594,454.87	14.15	5,322,373
		ENERGY									
2,890		ANADARKO PETE CORP COM		06/13/1990	1,618	1.1	51.01	90,381.77	147,418.90	0.37	57,037
10,586		BP PLC SPONSORED ADR		04/02/1971	16,197	3.1	49.35	29,571.17	522,419.10	1.32	492,848
43,802		EXXON MOBIL CORP COM		06/13/1990	43,802	2.4	41.00	294,718.90	1,795,882.00	4.54	1,501,163
19,000		ROYAL DUTCH PETE CO NY REGISTRY SH PAR N GLDR 1.25		06/13/1990	27,778	2.8	52.39	189,881.25	995,410.00	2.52	805,529
		TOTAL ENERGY			89,395	2.6		604,553.09	3,461,130.00	8.75	2,856,577
		UTILITIES									
17,000		DUKE ENERGY COM		12/13/02	18,700	5.4	20.45	228,273.13	347,650.00	0.88	119,377
14,475		WISCONSIN ENERGY CORP COM		03/11/1987	11,580	2.4	33.45	250,777.93	484,188.75	1.22	233,411
		TOTAL UTILITIES			30,280	3.6		479,051.06	831,838.75	2.10	352,788

SCHEDULE III, ATT. C

SCHEDULE OF INVESTMENTS

C A CANNON (322) TRUST
WACHOVIA BANK, N.A.
CO-TRUSTEE W/ RC HAYES, JR.
R C HAYES, H C CRAWFORD &
W C CANNON JR FBO ROBERT C HAYES

ACCT 1013731712

ASSETS HELD 12/31/03
VALUED AS OF 12/31/03

ROBERT CANNON HAYES
TRUST-(322)
PAGE 5 OF 5

SHARES OR FACE AMOUNT	PLG COD	DESCRIPTION	BOND RTNG	LATEST ACQ DATE	EST INC	CURR YLD	UNIT MARKET	TOTAL TAX COST	TOTAL MKT VALUE	PCT NV	UNREAL GN/LS
		TELECOMMUNICATIONS									
20,342		CT COMMUNICATIONS INC COM NEW		06/08/1976	5,289	1.9	13.50	8,069.47	274,617.00	0.69	266,548
17,043		VERIZON COMMUNICATIONS COM		05/06/1982	26,246	4.4	35.03	94,735.28	597,868.46	1.51	503,133
		TOTAL TELECOMMUNICATIONS			31,535	3.6		102,804.75	872,485.44	2.21	769,681
		FINANCIALS									
64,499		AMERICAN INTL GRP INC COM		01/29/1985	11,570	0.4	66.28	134,731.98	2,949,393.72	7.46	2,814,662
20		BERKSHIRE HATHAWAY INC DEL CL A		12/13/02	0	0.0	84,250.00	490,572.33	1,685,000.00	4.26	1,194,428
18		BERKSHIRE HATHAWAY INC DEL CL B		12/31/1998	0	0.0	2,815.00	7,684.96	50,670.00	0.13	42,985
8,745		CITIGROUP INC COM		08/25/1983	12,243	2.9	48.54	41,694.33	424,482.30	1.07	382,788
69,256		FIRST CHARTER CORP COM		04/02/1971	51,249	3.8	19.55	58,448.10	1,353,954.80	3.42	1,295,507
		TOTAL FINANCIALS			75,062	1.2		733,131.70	6,463,500.82	16.35	5,730,369
		TOTAL COMMON STOCKS			696,257	2.2		5,100,034.85	31,183,488.16	78.87	26,083,453
		OTHER ASSETS & LIABILITIES									
		PARTNERSHIPS									
		PRIVATE INVESTMENT FUNDS									
2		MEDICAL INVESTORS LLC		12/21/00	0	0.0	114,500.00	229,000.00	229,000.00	0.58	0
		TOTAL FUND			1,009,540	2.6		12,913,480.04	39,535,719.78	100.00	26,622,240

SCHEDULE III, ATT. C

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RECORDS CENTER 3
2004 MAY 14 PM 1:34
(Office Use Only)

MC

John David Hayworth Jr.
(Full Name)

2434 Rayburn Blding
Washington, DC 20515
(Mailing Address)

Daytime Telephone: 202/225-2190

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. D. Hayworth M.C.	5/13/04

1905

Name John David Hayworth Page 2 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Team PAC	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
	American Assoc. of Airport Executives	Jan 10-11	Kamuela, Hawaii	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A

For use by Members, officers, and employees

5

LEGISLATIVE RESOURCE CENTER

2004 MAY 10 PM 4:33

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

JOEL M. HEFLEY
(Full Name)

RM. 2372 Rayburn HOB 20515
(Mailing Address)

202-225-4422
Daytime Telephone:

Filer Status: [X] Member of the U.S. House of Representatives — State: CO. District: 5th

[ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15)

[ ] Amendment

[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	V. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joel M. Hefley	5/6/04

1908

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
CO. STATE LEGISLATURE	spouse salary	

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JOEL M. HEFLEY

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset											Block C: Type of Income						Block D: Amount of Income									Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAIN	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp Stock				X								X														P
			Simon & Schuster			Indefinite														Royalties								X	
			1st Bank of Paducah, KY accounts														X												
JT	GID MARGOLIS WE. EDISTO IS., S.C.								X						X														
	Public Emp. Retirement Assn.					X										NONE				UNTIL	Retirement								
	TEACHERS INS. ANNUITY								X							NONE				UNTIL	Retirement								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joel M. Hefley

Page 4 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Congressional Fed. Credit Union					X										X							X									

This page may be copied if more space is required.

Name Joel M. Hefley | Page 5 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B	C $15,001–$50,000	D	E $100,001–$250,000	F	G $500,001–$1,000,000	H	I $5,000,001–$25,000,000	J	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Bank of Northumberland Heathville, VA.	Loan on investment property										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
N/A		

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVER

LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 5:24
(Office Use Only)
U.S. HOUSE OF REPRESENTATIVES

Jeb Hensarling
(Full Name)

423 Cannon HOB Washington, DC 20515
(Mailing Address)

202-225-3484
Daytime Telephone:

Filer Status: ☑ Member of the U.S. House of Representatives — State: TX District: 05 ☐ Officer Or Employee — Employing Office:

Report Type: ☑ Annual (May 15) ☐ Amendment ☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☐ No ☑	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jeb Hensarling	5/17/04

1913

SCHEDULE I - EARNED INCOME

Name Jeb Hensarling

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
San Jacinto Ventures, LLC Dallas, TX	Income (earned in '02, received in '03)	$20,071

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jeb Hensarling

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Bank of America Checking Account	$1,001 - $15,000		NONE	
JT	Coca Cola Co. - Stock	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Cohen & Steers Realty Mutual Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Computer Associates - Stock	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Dallas National Bank; Bank Stock	$15,001 - $50,000		NONE	
	Dreyfus Disciplined Stock Fund	$15,001 - $50,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jeb Hensarling

	Dreyfus Emerging Leaders Mutual Fund	$15,001 - $50,000		NONE	
	Dreyfuss New Leaders Mutual Fund	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Equity Residential Properties Mutual Fund	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Family Support Assurance Corp., Data Mgmt Stock	$1,001 - $15,000		NONE	
	Fidelity Municipal Money Market Fund	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Fidelity OTC Portfolio Mutual Fund	$15,001 - $50,000		NONE	
	Fidelity Overseas Mutual Fund	$15,001 - $50,000	DIVIDENDS	$2,501 - $5,000	
	Fidelity Select Biotechnology Fund - IRA	$50,001 - $100,000		NONE	
	Fidelity Select Electronics Mutual Fund	$100,001 - $250,000		NONE	
	Fidelity Select Financial Services Mutual Fund	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Green Mountain Energy Co. - Stock	$250,001 - $500,000		NONE	
	Green Mountain Energy Co. Options (150k @ 6.67 -expires 11/2/09; 25k @ 3.59 -expires 9/27/10; 12/31/03 stock price was $3.50)	None		NONE	
	IMCO Recycling, Inc. - Stock	$50,001 - $100,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Jeb Hensarling

	IMCO Recycling, Inc. Options [1) 2767 @ 10.5625/sh, ex: 12/15/09; 2) 3773 @ 4.50/sh, ex: 12/15/10; 3) 4000 @ 6.50/sh, ex: 4) 3/10/11; 4000 @ 11.06/sh, ex: 5/8/12; 12/31/03 stock price was $9.89]	$15,001 - $50,000		NONE	
	Maverick Fund, NY; Investment Fund	$100,001 - $250,000		NONE	
	Michaels Stores, Inc. - Stock	$100,001 - $250,000		NONE	
	Neuberger & Berman Genesis Mutual Fund	$15,001 - $50,000		NONE	
	Robertson & Stephen Value & Growth Mutual Fund	$1,001 - $15,000		NONE	
	Schwab 1000 Fund	$1,001 - $15,000		NONE	
SP	Smith Barney IRA	$15,001 - $50,000		NONE	
	Vanguard S&P 500 Portfolio Mutual Fund	$250,001 - $500,000	DIVIDENDS	$2,501 - $5,000	
	Zixit Corp Stock	$50,001 - $100,000		NONE	

SCHEDULE IV - TRANSACTIONS

Name Jeb Hensarling

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Schwab 1000 Fund	P	Transaction date & origin unknown	$1,001 - $15,000

SCHEDULE V - LIABILITIES

Name Jeb Hensarling

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Green Mountain Energy Co.; Austin, TX	Promisory Note for Stock Purchase	$100,001 - $250,000

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A For use by Members, officers, and employees

HAND DELIVERED

HC

LEGISLATIVE RESOURCE CENTER

2004 MAY 13 PM 5:44

(Office Use Only)

CLERK OF THE HOUSE OF REPRESENTATIVES

Walter William Herger, Jr.
(Full Name)

2268 Rayburn House Office Building Washington, DC 20515
(Mailing Address)

202-225-3076
Daytime Telephone:

Filer Status	☑ Member of the U.S. House of Representatives	State: CA District: 02	☐ Officer Or Employee — Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wally Herger	5-13-04

1920

SCHEDULE I - EARNED INCOME

Name Walter William Herger, Jr.

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
St. Elizabeth's Community Hospital	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Walter William Herger, Jr.

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	1120 4th Ave. (Rio Oso, CA)	$100,001 - $250,000	RENT	$15,001 - $50,000	N/A
	Herger Ranch (Rio Oso, CA)	$1,000,001 - $5,000,000	RENT	$15,001 - $50,000	N/A
	Herger Gas (Rio Oso, CA)	$1,000,001 - $5,000,000	S-corp Allocation	$5,001 - $15,000	N/A
	Feather River State Bank (interest bearing checking account)	$15,001 - $50,000	INTEREST	$1 - $200	N/A

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Walter William Herger, Jr.

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Public Governance Institute/Congressional Retreat 2003	Feb. 28-Mar. 2, 2003	Washington, DC to White Sulphur Springs, West Virginia to Washington, DC	Y	Y	Y	N/A
Western Watch/ Partnership For The West Grassroots Action Summit	Sept. 26, 2003	Washington, DC to Denver, CO to Sacramento, CA	Y	Y	N	N/A
The Public Governance Inst./ CA Delegation Retreat	Dec. 5-7, 2003	Sacramento, CA to Mission Hills, CA to Sacramento, CA	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name Walter William Herger, Jr.

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President/Director (Uncompensated)	Herger Gas, Inc. (Propane Gas Distribution, Rio Oso, CA)

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2004 MAY 17 PM 3:03

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A Page 1 of 6

For use by Members, officers, and employees

Baron P. Hill
(Full Name)

1024 Longworth HOB Washington, DC 20515
(Mailing Address)

(202) 225-5315
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives — State: IN District: 09	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX.	Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
Exemptions–	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Baron P. Hill	May 17, 2004

1925

SCHEDULE I - EARNED INCOME

Name Baron P. Hill

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Seymour Cummunity Schools	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Baron P. Hill

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
JT	Merrill Lynch Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Merrill Lynch Growth	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Merrill Lynch Basic	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Merrill Lynch Capital	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JT	Indiana Public Employees Retirement Fund (PERF) Bonds	$50,001 - $100,000	INTEREST	$1,001 - $2,500	
JT	Cisco Systems (CSCO)	$1 - $1,000		NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Baron P. Hill

JT	Sun Microsystems (SUNW)	$1 - $1,000		NONE	
JT	Oracle Corporation (ORCL)	$1,001 - $15,000		NONE	
JT	Teacher Retirement Fund	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
JT	Nortel Networks (NT)	$1 - $1,000		NONE	P

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Baron P. Hill

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Community Financial Services Association, Advance America, CNG Financial, Jones Management LLC, Cash America Inc., Sofwise Inc.	June 24-27	Wash., DC-Jackson Hole, WY-Wash., DC	Y	Y	Y	N/A
Public Governance Institute	Feb 28-March 2	Wash. DC-White Sulpher Springs, WV-Wash. DC	Y	Y	N	N/A
American Israel Education Foundation	Aug 2-Aug 10	Ft. Myer, FL-Israel-Lousiville, KY	Y	Y	N	N/A

SCHEDULE VIII - POSITIONS

Name Baron P. Hill

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board	Sycramore Land Trust
Editorial Advisory Board	WDRB TV Louisville, KY

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

CLERK'S OFFICE
2004 MAY 13 PM 5:05

MC

Maurice D. Hinchey
(Full Name)

2431 Rayburn HOB Washington, DC 20515
(Mailing Address)

202-225-6335
Daytime Telephone:

(Office Use Only)

Filer Status	☑ Member of the U.S. House of Representatives — State: NY District: 22	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☐ No ☑	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☐ No ☑	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☐ No ☑	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☐ No ☑	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☑

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Maurice D. Hinchey	5/13/04

1931

SCHEDULE I - EARNED INCOME

Name Maurice D. Hinchey

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
State of New York	Legislative Pension	$32,724

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Maurice D. Hinchey

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
	Alfacell Common Stock	$1 - $1,000	Capital Gains and Dividends	NONE	
	Prudential IRA Variable Investment	$15,001 - $50,000	Capital Gains and Dividends	NONE	
	Novo Networks	$1 - $1,000	Capital Gains and Dividends	NONE	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Maurice D. Hinchey

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Christopher Reynolds Foundation	Jan 11 - 16	Albany, NY - Havana, Cuba -- Albany, NY	Y	Y	N	N/A
International Management & Development Institute	Feb 18-23	Albany, NY-- Cologne, Germany -- Albany, NY	Y	Y	N	N/A
Islamic Free Market Institute Foundation & University of Qatar	Apr 12-18	Albany, NY – Doha, Qatar – Amman, Jordan -- Tel Aviv, Israel	Y	Y	N	N/A
National Coordinated Effort of Hellenes	Apr 18 - 26	Tel Aviv, Israel -- Athens, Greece -- Albany, NY	Y	Y	N	N/A
Congressional Program of the Aspen Institute	May 26 - Jun 1	Albany, NY – Rome, Italy – Albany, NY	Y	Y	N	N/A
Free Press	Nov 7 - 9	Albany, NY – Madison, WI -- Albany, NY	Y	Y	N	N/A
American Shipbuilding Assoc.	Dec 1 - 3	Albany, NY – Naples, FL – Albany, NY	Y	Y	N	N/A
Congressional Program of the Aspen Institute	Dec 4 - 7	Albany, NY – Punta Mita, Mexico – Albany, NY	Y	Y	N	N/A

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

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LEGISLATIVE RESOURCE CENTER
2004 MAY 17 AM 11:59
(Office Use Only)

A $200 penalty shall be assessed against anyone who files more than 30 days late.

RUBEN E. HINOJOSA
(Full Name)

P.O. BOX 1075
(Mailing Address)

(202) 225-2531
Daytime Telephone

MERCEDES, TX 78570

Filer Status	☒ Member of the U.S. House of Representatives — State: TEXAS District: 15TH	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ruben E. Hinojosa	May 16, 2004

Name RUBEN E. HINOJOSA | Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
H & H MEAT PRODUCTS CO., INC.	CONSULTING FEES	20,000
DRISCOLL FOUNDATION	SPOUSE DIRECTOR FEES	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name RUBEN E. HINOJOSA

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X Over $1,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X																		P
	Examples: Simon & Schuster		Indefinite																	Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X																
	342 S. TEXAS AVE./MERCEDES, TX RUBEN'S RENTAL BUILDING					X									X																	
	REAL ESTATE ASSOCIATES		X																	PARTNERSHIP INCOME												
	HINOJOSA ENTERPRISES			X																PARTNERSHIP INCOME	X											
	HINOJOSA DEVELOPMENT								X											PARTNERSHIP INCOME												
SP	FIRM CONSULTANTS, INC.			X																S CORPORATION INCOME	X											
	H & H FOODS ESOP						X							X							X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name RUBEN E. HINOJOSA

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	E $50,001 – $100,000	G $250,001 – $500,000	I $1,000,001 – $5,000,000	K $25,000,001 – $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENTS, ROYALTIES	INTEREST	EXCEPTED TRUST	EXCEPTED BUSINESS	Other: Type of Income (Specify)	BLOCK D Amount of Income: I None	III $201 – $1,000	V $2,501 – $5,000	VII $15,001 – $50,000	IX $100,001 – $1,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	H & H FOODS STOCK					X		X						X						
DC	MERRILL LYNCH CMA		X					X		X										
DC	TEXAS REGIONAL BANCSHARES							X												
SP	MERRILL LYNCH (IRA) - CASH		X					X												
SP	AVAYA INC							X						X						
SP	AGERE SYSTEMS INC							X						X						
SP	INTL BANCSHARES STOCK		X					X							X					
SP	LUCENT TECHNOLOGIES STOCK							X						X						
SP	MICROSOFT CORP. STOCK		X					X												
SP	WORLDCOM INC STOCK	X						X						X						
DC	TEXAS TOMORROW FUND									X				X						
JT	BANK OF AMERICA CHECKING (DC)		X								N/A			X						
JT	BANK OF AMERICA SAVINGS									X										
	MERRILL LYNCH CMA			X						X					X					
	DAIN RAUSCHER (IRA)																			
	MFS TOTAL RETURN FUND - A							X							X					
	MASSACHUSETTS INVESTORS							X							X					
	MFS GOV'T SECURITIES FUND							X							X					
DC	MERRILL LYNCH CMA							X		X										
DC	TEXAS REGIONAL BANCSHARES		X					X												P

This page may be copied if more space is required.

Name RUBEN E. HINOJOSA

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-03		X								
DC	TEXAS REGIONAL BANCSHARES STOCK		X		5-6-03	X									
DC	TEXAS REGIONAL BANCSHARES STOCK				9-15-03	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
				C $15,001–$50,000		E $100,001–$250,000		G $500,001–$1,000,000		I $5,000,001–$25,000,000		K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	HINOJOSA DEVELOPMENT CO.	PERSONAL LOAN 1984										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PARTNER	HINOJOSA DEVELOPMENT COMPANY
PARTNER	HINOJOSA ENTERPRISES
PARTNER	REAL ESTATE ASSOCIATES LIMITED II

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2004 91-910 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

AND DELIVER
LEGISLATIVE RESOURCE CENTER
2004 MAY 17 PM 3:48
MC
(Office Use Only)

David L. Hobson
(Full Name)

2905 Kilkenny Drive Springfield, OH 45503
(Mailing Address)

202-225-4324
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State: OH District: 07	☐ Officer Or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes ☑ No ☐	
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes ☐ No ☑	
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes ☑ No ☐	
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes ☑ No ☐	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes ☑ No ☐	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes ☐ No ☑	
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? If yes, complete and attach Schedule VII.	Yes ☑ No ☐	
VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes ☑ No ☐	
IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes ☑ No ☐	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts--	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☑
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☑ No ☐

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David L. Hobson	5-13-04

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SCHEDULE I - EARNED INCOME

Name David L. Hobson

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Public Employee Retirement System of Ohio	Legislative Pension	$12,041

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full name of any mutual funds. For a self directed IRA (i.e., one where you have the power to select the specific investments) provide information on each asset in the account that exceeds the reporting threshold and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Year-End Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership Income or Farm Income)	BLOCK D **Amount of Income** For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.
I-Four Partnership (Bldg& Land) 2138 N. Limestone, Springfield, Ohio	$1,000,001 - $5,000,000	RENT	$2,501 - $5,000		
Fidelity Investment Advisors, Inc. (S-Corp), (Partner in Turnberry Village (Closed 2003), Edinburgh Village (Closed 2003), Prestwick Village (Closed 2003), Birkdale Village Ltd and Aberdeen Village) McArthur, OH	$1,000,001 - $5,000,000	S-CORP. INCOME, INTEREST, RENTAL INCOME	$100,001 - $1,000,000		
Fidelity Investment Advisors, Inc. Land on Rte 68, Springfield, OH	None	RENT/CAPITAL LOSS	$201 - $1,000		S

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L Hobson

	Fidelity Investment Advisors, Inc. Investments at Salomon Smith Barney	$100,001 - $250,000	DIVIDENDS/INTEREST	$5,001 - $15,000
	The Offices at Rickenbacker, LLC (Buildings & Land), Dublin, OH	$250,001 - $500,000	INTEREST/RENT	NONE/PARTNERSHIP LOSS
	Village Associates, LLC (Buildings & Land), Powell, OH	$250,001 - $500,000	RENT	$2,501 - $5,000
	Spring Creek Shopping Center, LLC (Buildings & Land), Columbus, OH	$50,001 - $100,000	RENT	$15,001 - $50,000
	Fujiyama Columbus Partnership, Note Receivable	$250,001 - $500,000	INTEREST	$15,001 - $50,000
	Fujiyama Indianapolis Partnership, Note Receivable	$100,001 - $250,000	INTEREST	$15,001 - $50,000
SP	Delaware Group (Mutual Fund)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500
	Scudder Mutual Funds	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
SP	Proctor & Gamble (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000
	Proctor & Gamble (Stock)	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500
	IBM Corp Stock	$1,001 - $15,000	DIVIDENDS	$1 - $200
	FLC (Stock)	$50,001 - $100,000	DIVIDENDS	NONE
	International Basic Resources (Stock)	$1,001 - $15,000	DIVIDENDS	NONE

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L Hobson

	Ohio Public Employee Retirement Fund	$15,001 - $50,000	PENSION	$5,001 - $15,000	
	Assets Held in Salomon Smith Barney #715-51764-10				
	Citigroup, Inc. (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Intel Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Nokia Sponsored ADR (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Park National Corp (Stock)	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Cisco Systems, Inc. (Stock)	$15,001 - $50,000	DIVIDENDS	NONE	
	Champaign Telephone Co. (Stock)	$50,001 - $100,000	DIVIDENDS	$1,001 - $2,500	
	Chevron/Texaco Corp (stock)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	IBM Corp (Stock)	None	DIVIDENDS/CAPITAL LOSS	NONE	S
	Proctor & Gamble (Stock)	$50,001 - $100,000	DIVIDENDS	$201 - $1,000	
	Microsoft Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	AOL/Time Warner, Inc. (Stock)	None	DIVIDENDS/CAPITAL LOSS	NONE	S
	Arlington Bank Restricted (Stock)	$15,001 - $50,000	DIVIDENDS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

	Tyco Intl, Inc. (Stock)	None	DIVIDENDS/CAPITAL LOSS	$1 - $200	S
	Amgen, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Dell, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	NONE	P
	Huntington Bancshares, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Lucent Technologies, Inc. (Stock)	$1 - $1,000	DIVIDENDS	NONE	P
	JM Smucker Co (Stock)	$1 - $1,000	DIVIDENDS	$1 - $200	P
	John Hancock Bank & Thrift Opportunity Fd(Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Sony Corp (Stock)	None	DIVIDENDS/CAPITAL GAINS	$2,501 - $5,000	PS
	Assets Held in Salomon Smith Barney #715-45624-12				
	Park National Corp (Stock)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Microsoft Corp (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Doubleclick, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Nokia Corp Sponsored ADR (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	S
	Intel Corp (Stock)	$15,001 - $50,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

	American Express Co. (Stock)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Citigroup, Inc. (Stock)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	IBM Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Proctor & Gamble (Stock)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Cisco Systems, Inc. (Stock)	$15,001 - $50,000	DIVIDENDS	NONE	
	General Electric CO (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Home Depot Inc (Stock)	$15,001 - $50,000	DIVIDENDS	$1 - $200	
	Pfizer, Inc. (Foremerly Pharmacia Corp) (Stock)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
	Walmart Stores, Inc. (Stock)	$15,001 - $50,000	DIVIDENDS	$1 - $200	P
	Assets Held in IRA Advest #WSD-800201-51				
	Microsoft Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Park National Corp (Stock)	$15,001 - $50,000	DIVIDENDS	$1,001 - $2,500	
	Money Funds	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Nokia Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

	Merck & Co. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Medco Health Solutions, Inc. (Stock)	$1 - $1,000	DIVIDENDS	$1 - $200	Received as Dividend under $1,000
	Assets Held in IRA Salomon Smith Barney #715-50987-13				
	Select Unit Trust	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	SSB Money Funds	$1 - $1,000	DIVIDENDS	$1 - $200	
	Smith Barney Lg Cap Growth Fd (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Smith Barney Aggressive Growth Fd (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Salomon Brothers Capital Fund (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
SP	Assets Held in IRA Salomon Smith Barney #715-57493-15				
	Select Unit Trust	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	SSB Money Funds	$1 - $1,000	DIVIDENDS	NONE	
	Smith Barney Lg Cap Growth Fd (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Smith Barney Aggressive Growth Fd (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	Salomon Brothers Capital Fund (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

Assets Held in Salomon Smith Barney #715-06351-13				
Doubleclick, Inc. (Stock)	None	DIVIDENDS/CAPITAL LOSS	NONE	S
General Electric Co. (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	P
IBM Corp (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Unit Investment Trust	None	DIVIDENDS	NONE	S
Exxon Mobile Corp (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
Oracle Corp (Stock)	$1,001 - $15,000	DIVIDENDS	NONE	
Proctor & Gamble (Stock)	$500,001 - $1,000,000	DIVIDENDS	$5,001 - $15,000	
Yahoo, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	NONE	
Bank of New York, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Merck & Co (Stock)	$1,001 - $15,000	DIVIDENDS	$201 - $1,000	
Royal Dutch Petroleum Co. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
JM Smucker Co (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	
Medco Health Solutions, Inc (Stock)	$1,001 - $15,000	DIVIDENDS	NONE	Received as Dividend under $1,000

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David L. Hobson

	Qualcomm, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	$1 - $200	P
	Valueclick, Inc. (Stock)	$1,001 - $15,000	DIVIDENDS	NONE	P
SP	Assets Held in Salomon Smith Barney #715-01917-11				
	Proctor & Gamble (Stock)	$15,001 - $50,000	DIVIDENDS	$201 - $1,000	
	Park National Corp (Stock)	$100,001 - $250,000	DIVIDENDS	$2,501 - $5,000	
	Smith Barney Lg Cap Growth Fd (Mutual Fund)	$1,001 - $15,000	DIVIDENDS	NONE	
	Unit Investment Trust	$1,001 - $15,000	DIVIDENDS	$1 - $200	
	SSB Money Funds	$1 - $1,000	DIVIDENDS	$1 - $200	
	Citibank Bank Deposit Program	$1,001 - $15,000	INTEREST	$1 - $200	
	JM Smucker Co (Stock)	$1 - $1,000	DIVIDENDS	$1 - $200	P

SCHEDULE IV - TRANSACTIONS

Name David L. Hobson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Fidelity Investment Advisors, Inc. Land on Rtre 68, Springfield, OH	S	07-26-03	$50,001 - $100,000
	Assets Held in Salomon Smith Barney #715-51764-10			
	IBM Corp (Stock)	S	11-06-03	$1,001 - $15,000
	AOL/Time Warner, Inc. (Stock)	S	05-28-03	$1,001 - $15,000
	Tyco Intl, Inc.	S	11-06-03	$1,001 - $15,000
	Dell, Inc (Stock)	P	05-28-03	$1,001 - $15,000
	Huntington Bancshares, Inc. (Stock)	P	11-06-03	$1,001 - $15,000
	Lucent Technologies, Inc. (Stock)	P	11-06-03	$1,001 - $15,000
	JM Smucker CO (Stock)	P	05-28-03	$1,001 - $15,000
	John Hancock Bank & Thrift Opportunity Fd (Mutual Fund)	P	11-06-03	$1,001 - $15,000
	Sony Corp (Stock)	PS	Various	$1,001 - $15,000
	Assets Held in Salomon Smith Barney #715-45624-12			

STEVE STUCKEY CPA

SCHEDULE IV - TRANSACTIONS

Name David L. Hobson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Nokia Corp Sponsored ADR (Stock)	S	12-01-03	$1,001 - $15,000
	Walmart Stores, Inc (Stock)	P	12-01-03	$1,001 - $15,000
	Assets Held in IRA Advest #WSD-800201-51			
	Money Funds	P	Various	$1,001 - $15,000
	Assets Held in IRA Salomon Smith Barney #715-50987-13			
	Smith Barney Lg Cap Growth Fd (Mutual Fund)	P	06-18-03	$1,001 - $15,000
	Salomon Brothers Capital Fund (Mutual Fund)	P	12-24-03	$1,001 - $15,000
SP	Assets Held in IRA Salomon Smith barney #715-57493-15			
	Smith Barney Lg Cap Growth Fd (Mutual Fund)	P	06-18-03	$1,001 - $15,000
	Salomon Brothers Capital Fund (Mutual Fund)	P	12-24-03	$1,001 - $15,000
	Assets Held in Salomon Smith Barney #715-06351-13			
	Doubleclick, Inc. (stock)	S	12-19-03	$1,001 - $15,000

SCHEDULE IV - TRANSACTIONS

Name David L. Hobson

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	General Electric Co (Stock)	P	01-30-03	$1,001 - $15,000
	Unit Investment Trust	S	01-30-03	$1,001 - $15,000
	Qualcomm, Inc. (Stock)	P	01-30-03	$1,001 - $15,000
	Valueclick, Inc. (Stock)	P	12-19-03	$1,001 - $15,000
	Assets Held In Salomon Smith Barney #715-01917-11			
	JM Smucker Co (Stock)	P	01-30-03	$1,001 - $15,000

STEVE SLUCKEY CPA

SCHEDULE V - LIABILITIES

Name David L. Hobson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	KeyBank	Fujiyama Columbus OH Partnership Restaurant & Land	$250,001 - $500,000
	Security National Bank	First Mortgage on 2138 N. Limestone Street	$500,001 - $1,000,000
	Huntington National Bank (Paid off 2003)	Mortgage on Parcels #22033440032 & #22033440020, Rte 68 Springfield, OH (Fidelity Investment Advisors, Inc.)	$50,001 - $100,000
	Heller Small Business Lending Corp, Indianapolis, IN	Mortgage on Fujiyama Restaurant, Indianpolis, IN	$100,001 - $250,000
	Security National Bank	Business Note	$15,001 - $50,000
	Salomon Smith Barney	Note Secured by Stock	$500,001 - $1,000,000
	New Carlisle Federal	Revolving Line of Credit	$50,001 - $100,000
	Provident Bank (Paid off 2003)	Business Note, Edinburgh Village Development, St Rte 48, Dayton, OH (Fidelity Investment Advisors, Inc.)	$250,001 - $500,000
	National City Bank	Business Note, The Offices at Rickenbacker, LLC	$250,001 - $500,000
	SkyBank (Paid off 2003)	Business Note, Prestwick Village Partnership (Fidelity Investment Advisors, Inc.)	$250,001 - $500,000

SCHEDULE V - LIABILITIES

Name David L Hobson

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of your or your spouse. Report "revolving charge accounts" only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	SkyBank (Paid off 2003)	Business Note, Fidelity Investment Advisors, Inc.	$100,001 - $250,000
	Provident Bank	Business Note, Birkdale Village Ltd Partnership, Dayton, OH (Fidelity Investment Advsiors, Inc.)	$500,001 - $1,000,000
	US Bank	Business Note, Village Associates LLC, Powell, OH	$250,001 - $500,000

PAGE 10 OF 1 STEVE BUNKER VFH 3376430034 05/17/2004 11:00

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name David L. Hobson | 16 OF 18

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Congressional Program of the Aspen Institute, Conference on US-China Relations	Jan. 17-22	Cincinnati, OH - Lanai, Hawaii - Cincinnati, OH	Y	Y	Y	N/A
Congressional Program of Aspen Institute, Conference on Education Reform	Feb. 14-19	Congressman - Washington DC - Jamaica - Miami, FL, Spouse - Columbus, OH - Jamaica - Miami, FL	Y	Y	Y	N/A
Crop Life America	Feb. 21-24	Palm Beach Gardens, FL - Washington ** No transportation for spouse	Y	Y	Y	N/A

SCHEDULE VIII - POSITIONS

Name David L. Hobson

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	I-Four
Officer	Fidelity Investment Advisors, Inc.
Partner	The Offices at Rickenbacker, LLC
Partner	Village Associates, LLC
Partner	Spring Creek Shopping Center, LLC

SCHEDULE IX - AGREEMENTS

Name David L. Hobson

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1982-Present	State of Ohio Public Retirement System	Continuing participataion in retirement plan

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

30

HAND DELIVERED

2004 MAY 14 PM 2:15

(Office Use Only)

JOSEPH m. HOEFFEL
(Full Name)

1908 LYCOMING AVE
(Mailing Address)

ABINGTON PA 19001

Daytime Telephone: 215-540-8444

Filer Status	☒ Member of the U.S. House of Representatives — State: PA District: 13	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joseph m Hoeffel	5/13/04

1960

Name Joseph M. Hoeffel | Page 1 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
SCHOOL DISTRICT OF PHILADELPHIA, PA	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Joseph M. Hoeffel | Page 2 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
XYZ Magazine	Article	Aug. 13, 2003	$500
The Connell Company One Connell Drive, Berkeley Hgts NJ 07922	Speech	05-02-2003	$2,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Joseph M. Hoffel

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	DIVIDENDS	INTEREST	EXCEPTED TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	XI	P, S, E
SP	Examples: Mega Corp. Stock				X								X														P
	Simon & Schuster		Indefinite													Royalties								X			
	1st Bank of Paducah, KY accounts													X													
	VANGUARD INDEX 500 STOCK		X										X														
	VANGUARD WINSOR II IRA			X									X				N/A										
	VANGUARD WELLESLEY IRA			X										N/A			N/A										
	AETNA VARIABLE FUND DEFERRED COMP				X								N/A				N/A										
	EQUITABLE IRA				X								N/A				N/A										
	SCHOOL DISTRICT OF PA PENSION												N/A				N/A										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph M. Hoeffel

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L [illegible]	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	COMPLETED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	VANGUARD ASSET ALLOCATION IRA			X									NONE							NONE											

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SCHEDULE IV — TRANSACTIONS

Name Joseph M. Hoffel

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–03		X								
	VANGUARD INDEX 500 STOCK	X	X			X									

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1965

Name Joseph M. Hoeffel | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability								
			$10,001–$15,000	C $15,001–$50,000	$50,001–$100,000	E $100,001–$250,000	$250,001–$500,000	G $500,001–$1,000,000	$1,000,001–$5,000,000	I $5,000,001–$25,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X					
	AFSA, MILWAUKEE, WI	EDUCATION LOAN		X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
NONE		

Use additional sheets if more space is required.

1966

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
1)	Commonwealth Fund JFK School of Government Harvard University	1/16-1/18/03	Phila to Ft. Lauderdale Ft. Lauderdale to Freeport Island FL to Ft. Lauderdale to Philadelphia	Y	Y	Y	N
2)	Nat'l Parks Conservation Wilderness Society Greater Yellowstone Coalition	2/14-2/17/03	Phila. Pa. to Minneapolis-St. Paul to Bozeman, Mt. to Yellowstone Pk. Bozeman, Mt. to Minneapolis-St. Paul to Philadelphia	Y	Y	Y	Y 2/18/03

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 2004 91-910 (mac)

Use additional sheets if more space is required.

12/97

Amended Form 3/4/03

U.S. House of Representatives
EMPLOYEE TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with House Rule 51, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk shall make these forms available to the public as soon as possible after they are filed. *Provide a good faith estimate of all expenses.*

NAME OF EMPLOYEE (PRINT OR TYPE): JOSEPH M HOEFFEL

NAME OF ACCOMPANYING FAMILY MEMBER: FRANCESCA M

RELATIONSHIP TO EMPLOYEE (check one): ✓ spouse ___ child

DATES OF TRAVEL: 1/16/03 - 1/18/03

DATES AT PERSONAL EXPENSE: NA

DESTINATION(S): Turnberry Isle, Florida

SPONSOR (WHO PAID FOR THE TRIP): Commonwealth Fund JFK School of Government Harvard U

PURPOSE OF TRIP: Bi-partisan Health Policy Conference

TOTAL TRANSPORTATION EXPENSES:

For employee: 710.50

For accompanying spouse or child: 710.50

TOTAL LODGING EXPENSES:

For employee: 438.50

For accompanying spouse or child: 438.50

TOTAL MEAL EXPENSES:

For employee: 475.00

For accompanying spouse or child: 475.00

TOTAL OF ALL OTHER EXPENSES:

For employee: 44.95

For accompanying spouse or child: -0-

SIGNATURE OF EMPLOYEE: Joseph M Hoeffel DATE: 3/4/03

I authorized this travel in advance. I have determined that all of the expenses listed above were necessary and that the travel was in connection with the employee's official duties and would not create the appearance that he/she is using public office for private gain.

NAME OF SUPERVISING MEMBER/OFFICER (PRINT OR TYPE): JOSEPH M HOEFFEL

SIGNATURE OF SUPERVISING MEMBER/OFFICER: DATE:

Gipprich, Mel

From: christian_flynn@harvard.edu
Sent: Thursday, February 06, 2003 11:27 AM
To: Gipprich, Mel
Subject: Harvard Disclosure

Memorandum

February 5, 2003
Via e-mail:
mela.gipprich@mail.house.gov

To: Mel Gipprich
From: Christian Flynn
Re: John F. Kennedy School of Government/The Commonwealth Fund Bipartisan Congressional Health Policy Conference

Thank you very much for all your help in getting Congressman Hoeffel to the Conference at Turnberry Isle last month. It appears to have been a great success and everyone here appreciates your efforts.

The entire Conference was paid for by a grant from The Commonwealth Fund to the John F. Kennedy School of Government. I am providing you with some figures to help you fill out the Member/Officer Travel Disclosure Form. Please note that these numbers are the totals and should be adjusted if the Congressman brought a guest.

Total Transportation Expense
You should have the dollar amounts for the plane tickets, if not please contact June Doliber at The Travel Collaborative, (617) 497-8153. The cost of the car service from the airport to the hotel is $176.00 roundtrip.

88.00 each
622.50

Total Lodging Expenses
The room charges were $438.44 per night.

Total Meal Expenses
The group-catered functions cost $475.00 per person. In addition, the Congressman billed an additional $ 0 for meals eaten in the resorts restaurants.

Total of All Other Expenses
In addition to the above expenses, we provided each member with the following:
Jacket $35.00
Tote Bag $9.95

If you have any further questions, please call me at 617-496-7124. Again, thank you for all your help!

EASYLINK 7138822 7JAN03 11:31/11:31 EST
FROM: 49591612 49591612 TCOL UD
TRAVEL COLLABORATIVE/TRAIL TRA
TO: 2022260611

SALES PERSON: 79 ITINERARY DATE: 07 JAN 03
CUSTOMER NBR: 811458 FESIIU PAGE: 01

TO: MR CHRISTIAN FLYNN
KENNEDY SCHOOL
79 JFK ST
LITTAUER 274
CAMBRIDGE
MA 02138
FOR: HOEFFEL/JOSEPH REF: 205
HOEFFEL/FRANCESCA 205

16 JAN 03 - THURSDAY
AIR US AIRWAYS FLT:3 ECONOMY
LV PHILADELPHIA 630P EQP: BOEING 757
DEPART: TERMINAL B 02HR 54MIN
AR FT LAUDERDALE 924P NON-STOP
ARRIVE: TERMINAL 3 REF: HCCLSI
HOEFFEL/JOSEPH SEAT-26F
HOEFFEL/FRANCES SEAT-30F

18 JAN 03 - SATURDAY
AIR US AIRWAYS FLT:1240 ECONOMY
LV FT LAUDERDALE 610P EQP: BOEING 737 300
DEPART: TERMINAL 3 02HR 41MIN
AR PHILADELPHIA 851P NON-STOP
ARRIVE: TERMINAL B REF: HCCLSI

30 APR 03 - WEDNESDAY
OTHER BOSTON
HARVARD

COMMONWEALTH CONFERENCE
USAIRWAYS RECORD LOCATOR HCCLSI
ELECTRONIC TKT 0377322157347-HOEFFEL/J
ELECTRONIC TKT 0377322157348-HOEFFEL/F
ROUND TRIP TRANSFER FROM AIRPORT TO TURBERRY ISLE RESORT
AND RETURN TO AIRPORT PROVIDED BY CONFERENCE
LIMO COMPANY IS AVENTURA LIMO CO
AVENTURA LIMO CO 305-770-5458 OR CALL
JUNE DOLIBER/TRAVEL COLLABORATIVE 800-370-7400 EXT 53

John F. Kennedy School of Government/
The Commonwealth Fund

Bipartisan Congressional Health Policy Conference

Members of Congress and Guests

January 16-18, 2003

Turnberry Isle Resort Club
19999 West Country Club Drive
Aventura, Florida

Congressman Tom Allen (D-ME, 1st)
Diana Allen

Congresswoman Tammy Baldwin (D-WI, 2nd)
Lauren Azar

Congressman Xavier Becerra (D-CA, 30th)
Carolina Reyes

Senator Robert Bennett (R-UT)
Joyce Bennett

Senator Jeff Bingaman (D-NM)
Anne Bingaman

Congressman Timothy Bishop (D-NY 01st)
Kathryn Bishop

Senator John Breaux (D-LA)

Congressman Sherrod Brown (D-OH, 13th)

Congressman Benjamin Cardin (D-MD, 3rd)
Myrna Cardin

Congresswoman Diana DeGette (D-CO, 1st)
Lino Lipinsky

Congressman John Dingell (D-MI, 16th)
Debbie Dingall

Congressman Vernon Ehlers (R-MI, 3rd)
Jo Ehlers

Congressman Gene Green (D-TX, 29th)
Helen Green

Congressman Joe Hoeffel (D-PA, 13th)
Francesca Hoeffel

Congresswoman Nita Lowey (D-NY, 18th)
Stephen Lowey

Congresswoman Betty McCollum (D-MN, 4th)
Mary Diereich

Congressman Jim McCrery (R-LA 4th)

Congressman Charlie Norwood (R-GA, 10th)

Congressman Bart Stupak (D-MI, 1st)
Laurie Stupak

Senator George Voinovich (R-OH)
Janet Voinovich

Congressman Dave Weldon (R-FL, 15th)
Nancy Weldon

Congressman David Wu (D-OR, 1st)
Michelle Wu

John F. Kennedy School of Government/ The Commonwealth Fund
Bipartisan Congressional Health Policy Conference

Turnberry Isle Resort and Club
19999 West Country Club Drive, Aventura, Florida
January 16-18, 2003

Thursday, January 16
Turnberry Isle Resort and Club

6:00-7:00 — Opening Reception
Poolside

7:00 — Dinner
Garden Room I
WELCOME AND INTRODUCTIONS
Sheila P. Burke, R.N., M.P.A., FAAN, Adjunct Lecturer, John F. Kennedy School of Government
Karen Davis, Ph.D., President, The Commonwealth Fund

AMERICA'S HEALTH CARE PRIORITIES
Bob Blendon, Sc.D., Professor of Health Policy and Political Analysis, John F. Kennedy School of Government
Robert Reischauer, Ph.D., President, Urban Institute
Julie Wilson, Ph.D. (moderator), Director, Malcolm Wiener Center for Social Policy, John F. Kennedy School of Government

Friday, January 17
Turnberry Isle Resort and Club

8:00-9:00 — Continental Breakfast
Garden Foyer

9:00-10:30 — **REFORMING MEDICARE: ISSUES AND OPTIONS**
Garden Room II
Marilyn Moon, Ph.D., Senior Fellow, Urban Institute
Samuel O. Thier, M.D., President and CEO, Partners HealthCare System, Inc.; Professor of Medicine and Health Care Policy, Harvard Medical School
Gail Wilensky, Ph.D., Senior Fellow, Project HOPE
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

10:30-10:45 — Break
Garden Foyer

10:45-12:00 — **MEDICAID: FOCUSING ON STATE INNOVATION**
Garden Room II
Diane Rowland, Sc.D., Executive Director, Kaiser Commission on Medicaid and the Uninsured
Mary Kennedy, Medicaid Director, Department of Human Services, Minnesota
James Tallon, President, United Hospital Fund; Chairman, Kaiser Commission on Medicaid and the Uninsured
Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government

12:15-1:30 — Lunch
Garden Room I
BALANCING SAFETY, EFFECTIVENESS AND PUBLIC DESIRE: THE FDA AND CANCER
Joseph Simone, M.D., Chair, National Cancer Policy Board, Institute of Medicine; President, Simone Consulting

Jane E. Henney, M.D., Senior Scholar, Association of Academic Health Centers; former Commissioner of Food and Drugs, Food and Drug Administration
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

1:30-6:30 Private Time

6:30-7:15 Reception
Poolside

7:15 Dinner
Veranda East & West
COMPARING HEALTH CARE SYSTEMS: SUCCESSES, FAILURES, TRENDS
Uwe Reinhardt, Ph.D., James Madison Professor of Political Economy and Professor of Economics and Public Affairs, Princeton University
Sir Liam Donaldson, M.Sc., M.D., Chief Medical Officer, Department of Health, Department of Health, United Kingdom
The Honourable Anne McLellan, MP, Minister of Health, Canada invited
The Honourable Roy Romanow, Commissioner, Commission on the Future of Health Care in Canada
Julie Wilson, Ph.D. (moderator), Director, Malcolm Wiener Center for Social Policy, John F. Kennedy School of Government

Saturday, January 18
Turnberry Isle Resort and Club

8:00-9:00 Continental Breakfast
Garden Foyer

9:00-10:20
Garden Room II
STRATEGIES FOR EASING THE NURSE WORKFORCE SHORTAGE
Peter I. Buerhaus, Ph.D., FAAN, R.N., Valere Potter Professor of Nursing, Senior Associate Dean for Research, Vanderbilt University School of Nursing
Gary Mecklenburg, President and CEO, Northwestern Memorial HealthCare
Pamela Cipriano, Chief Clinical Officer, University of Virginia Health Systems
Diane McGivern, Professor, The Steinhardt School of Education, New York University
Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government

10:20-10:40 Break
Garden Foyer

10:40-12:00
Garden Room II
COVERING THE UNINSURED: PROSPECTS AND PROBLEMS
Cathy Schoen, Ph.D., Vice President, The Commonwealth Fund; Executive Director, Fund Task Force on the Future of Health Insurance
John W. Rowe, M.D., Chairman, President and CEO, Aetna Inc.
Stuart Butler, Ph.D., Vice President, Domestic and Economic Policy Studies, The Heritage Foundation
Judy Feder, Ph.D., Professor and Dean of Policy Studies, Georgetown University
Joseph P. Newhouse, Ph.D. (moderator), John D. MacArthur Professor of Health Policy and Management, Harvard University

12:15-1:30 Lunch

Garden Room I

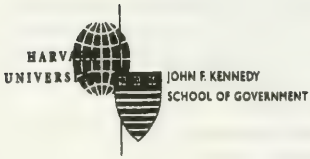
SMALLPOX VACCINATIONS: THE RISKS AND THE BENEFITS

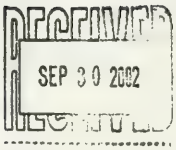
Donald A. Henderson, M.D., Founding Director, Center for Civilian Biodefense Studies, Johns Hopkins University, Bloomberg School of Public Health

William Bicknell, M.D., M.P.H., Professor of International Health, Boston University School of Public Health

Marci Layton, M.D., Assistant Commissioner for Communicable Disease, New York City Department of Health

Sheila P. Burke, R.N., M.P.A., FAAN (moderator), Adjunct Lecturer, John F. Kennedy School of Government





September 25, 2002

The Honorable Joe Hoeffel
1229 Longworth House Office Building
Washington, DC 20515

Dear Congressman Hoeffel:

We are delighted to invite you back for the fifth John F. Kennedy School of Government/Commonwealth Fund Bipartisan Congressional Health Policy Conference. Once again, a select group of members of the House and Senate are being invited to meet in an informal, off the record setting with a group of academics and practitioners from a wide variety of backgrounds who bring a multitude of opinions on some truly timely issues. Like last year, our "speakers" will make brief remarks at the outset of each session leaving ample time for discussion.

The retreat will again take place at Turnberry Isle Resort and Club in Aventura, Florida, www.turnberryisle.com. The dates are set for January 16-18, 2003, however like last year you and your spouse are invited to stay at the hotel through Sunday, January 19th. The program will begin with a dinner on Thursday evening. Sessions will run through lunch on Friday and Saturday, leaving your afternoons free for reflection on the morning's events. There is also a dinner scheduled for Friday evening. Our speakers are invited to stay throughout the program so you'll have a chance to meet with them outside of the sessions as well.

A draft schedule is enclosed for your review. Our goal is to again use this opportunity to reflect on a variety of topics, from the challenges and opportunities of research on the human genome, to questions related to the uninsured and patient safety. We will begin on Thursday evening with a discussion on improving health care quality.

Meetings are completely off the record and attendance is by invitation only. No press, staff or outside observers are permitted.

79 John F. Kennedy Street Cambridge, Massachusetts 02138

The meeting is being funded by a grant from the Commonwealth Fund, a private foundation that supports independent research on health and social issues and makes grants to improve health care practice and policy. Harvard University will cover travel and accommodation costs for you and your spouse for the duration of the program. No government, private, corporate, or special interest money is involved. Expenses for you and your spouse, including coach-class airfare, lodging, and meals, will be paid by Harvard University. If you can commit early, we would like to make airline reservations as soon as possible.

We are very hopeful that you will be able to join us again in 2003 and encourage you or your staff to call our conference coordinator, Christian Flynn (617) 496-7124, should you have any questions. We look forward to hearing from you.

Sincerely,

Sheila

Sheila Burke
Adjunct Lecturer in Public Policy

Joe Newhouse

Joseph Newhouse
John D. MacArthur Professor of Health Policy and Management

Julie

Julie Wilson
Director, Malcolm Wiener Center for Social Policy

12/97

U.S. House of Representatives

EMPLOYEE TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with House Rule 51, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 30 days after travel is completed. The Clerk shall make these forms available to the public as soon as possible after they are filed. *Provide a good faith estimate of all expenses.*

NAME OF EMPLOYEE (PRINT OR TYPE): JOSEPH M HOEFFEL

NAME OF ACCOMPANYING FAMILY MEMBER: FRANCESCA M HOEFFEL

RELATIONSHIP TO EMPLOYEE (check one): ✓ spouse ___ child

DATES OF TRAVEL: 02/14/03 - 02/17/03

DATES AT PERSONAL EXPENSE: 02/18/03

DESTINATION(S): Yellowstone National Park

SPONSOR (WHO PAID FOR THE TRIP): Greater Yellowstone Coalition/Nat'l Parks Conserv. Assn

PURPOSE OF TRIP: Yellowstone Nat'l Park - winter use issue

TOTAL TRANSPORTATION EXPENSES:

For employee: 926.00

For accompanying spouse or child: 926.00

TOTAL LODGING EXPENSES:

For employee: 185.00

For accompanying spouse or child: 185.00

TOTAL MEAL EXPENSES:

For employee: 250.00

For accompanying spouse or child: 250.00

TOTAL OF ALL OTHER EXPENSES:

For employee: /

For accompanying spouse or child: /

SIGNATURE OF EMPLOYEE: Joseph M Hoeffel DATE: 03/04/03

I authorized this travel in advance. I have determined that all of the expenses listed above were necessary and that the travel was in connection with the employee's official duties and would not create the appearance that he/she is using public office for private gain.

NAME OF SUPERVISING MEMBER/OFFICER (PRINT OR TYPE): JOSEPH M HOEFFEL

SIGNATURE OF SUPERVISING MEMBER/OFFICER: DATE:

TRIP SPONSORS

National Parks Conservation Association
1300 19th Street, NW, Washington, DC 20036
202/454-3398 office, 202/659-0650 fax
Steven Bosak, Director, Motorized Use Program, 202/997-0875 cell, sbosak@npca.org
Craig Obey, Vice President, Government Affairs, 202/454-3392 office, 202/669-9689 cell, cobey@npca.org

The Wilderness Society, Washington, DC
1615 M Street, Washington, DC 20036
202/429-2694 office, 202/429-8443 fax
Kristen Brengel, Campaign Manager, Natural Trails and Waters Coalition
202/320-2913 mobile, 202/364-2920 home
kristen_brengel@tws.org

The Wilderness Society, Northern Rockies Office, Bozeman, MT
105 W. Main, Suite E, Bozeman, MT 59715
406/586-1600 office, 406/586-4700 fax
Betsy Buffington, Assistant Director, 406/581-9826 cell, betsy_buffington@tws.org
Chris Mehl, Communication Director, 406/581-4992, cell, chris_mehl@tws.org

Greater Yellowstone Coalition, Bozeman, MT
13 S. Willson, Bozeman, MT 59715
406/586-1593 office, 406/586-0851 fax
Michael Scott, Executive Director, 406/581-7963 cell, mscott@greateryellowstone.org
Al Jaegger, Communication Director, ajaegger@greateryellowstone.org
Hope Sieck, Assoc. Program Director, 406/581-7961 cell
hsieck@greateryellowstone.org
Jon Catton, Spokesman, 406/585-9781 office, 406/581-7962 cell, joncatton@msn.com

Winter Wildlands Association
Women's Voices for the Earth
Aimee Boulanger, Executive Director

Visitors
Tom Murphy
Dave Long

Gipprich, Mel

From: Steven Bosak [SBOSAK@NPCA.ORG]
Sent: Thursday, February 27, 2003 4:59 PM
To: Gipprich, Mel
Subject: Yellowstone trip

1_contact list for Congression...

Mel,

Here are the costs for the Yellowstone trip for the Hoeffels:

Lodging for 3 nights: $370 (1 night paid by Greater Yellowstone Coalition; 2 nights by National Parks Conservation Association (NPCA))

Meals, Friday evening, 2/14 through, Monday afternoon: appx $500 (cost shared by Greater Yellowstone and NPCA)

Airfare: $926 x 2 = $1852.00 (paid by NPCA)

See attached document for addresses of the hosts.

Please call me if you have any questions.

Best,

Steve

-Steve

2/4/81

Contact Information for Yellowstone President's Day Weekend Trip

Here are some numbers that we recommend you give to your DC office and family and keep with yourself during the trip.
Please note that cell phones don't get reception in park.

Stage Coach Inn, West Yellowstone, MT - Friday night, Feb. 14
Direct Line: (406) 646-7381
Fax Line: (406) 646-9575 (.75 a page)

Old Faithful Snow Lodge, Yellowstone National Park - Saturday and Sunday nights, Feb. 15-16
Direct Line : (307) 545-4800
Fax Line: (307) 545-4827

Yellowstone National Park contact number -- Saturday to Monday morning: (307) 344-7901 and press 0

Hosts from DC:
Steven Bosak, NPCA, Cell:(202) 997-0875; Home: (202) 686-6922
Craig Obey, NPCA, Cell: (202) 669-9689
Kristen Brengel, Natural Trails and Waters Coalition (The Wilderness Society), Cell: (202) 320-2913; Home: (202) 364-2920
Steve, Craig and Kristen will be travelling on Delta Airlines from Dulles to Salt Lake City to Idaho Falls at 10:40 AM, Friday, Feb. 14th
We will rent cars in Idaho Falls and drive two hours to West Yellowstone.

National Parks Conservation Association
The Wilderness Society – Greater Yellowstone Coalition

Presidents' Weekend Trip to Yellowstone National Park
February 14-17, 2003

Contact: Steve Bosak, National Parks Conservation Association
Office, 202/454-3398; Cell, 202/997-0875

Confirmed Guests (8):
Rep. Joseph Hoeffel and Francesca Montori Hoeffel
Rep. Rush Holt and Dr. Margaret (Annie) Lancefield
Rep. Nick Rahall II
Kristy Crooks (Rep. Shays' office)
Eric Gordon (Rep. Holt's office)
Lisa Moore (Sen. Reid's office)
Christy Plumer (Sen. Chafee's office)

Hosts (7):
Steve Bosak and Craig Obey – National Parks Conservation Association
Kristen Brengel, Betsy Buffington, Chris Mehl – The Wilderness Society
Jon Catton, Hope Sieck, Michael Scott – Greater Yellowstone Coalition

Draft Agenda[1]

Friday, February 14

1:00 PM	Rep. Hoeffel and wife Francesca Montori arrive Bozeman, MT airport (Hope pick-up and take to Bozeman for lunch)
3:15	Rep. Rahall and staffers arrive Idaho Falls, ID airport (Craig, Steve, Kristen drive group)
4:06	Rep. Holt and wife arrive Bozeman, MT airport (Hope pick-up)
5:30 – 6:30	West Yellowstone: Guests check-in to Stagecoach Inn, West Yellowstone, MT
7:00	Welcome Dinner with Hosts at Uncle's Laurie's Riverside Grill

[1] There is some flexibility in the agenda to accommodate the needs of the tour group and to allow for potential weather delays.

Saturday, February 15

7:15 AM	Depart Stagecoach Inn with luggage for West Entrance of Yellowstone *(We will provide breakfast and coffee at the entrance. We will be at the entrance for while to observe the snowmobile scene and Park Service rangers who work the West Entrance.)*
9:00 – 9:30	Depart West Entrance for Old Faithful on snowcoach tour *(We may leave earlier, depending on weather and group needs).*
12:00 PM	Box lunch en route to Old Faithful
3:00	Arrive Old Faithful Snowlodge; check-in guests
5:00	Optional walk with wildlife photographer Tom Murphy
5:15/ 6:15/6:30	Dinner seatings at Old Faithful Snow Lodge
8:00	Evening Program: speakers, slide show Spend night at Old Faithful Snow Lodge

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Sunday, February 16

7:00 AM	Morning Tour of Geyser Basin
9:30	Breakfast at Old Faithful
12 PM	Box lunch
1:00-5:00	Ski/Snowshoe Tours to Upper Geyser Basin or Lone Star Geyser
5:30/6:15/6:30	Dinner seatings at Old Faithful Snow Lodge
8:00	Possible Evening Program Spend night at Old Faithful Snow Lodge

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Monday, February 17

7:00 AM	Guests with Monday PM flights depart Snow Lodge for West Yellowstone
9:30	Mr. Rahall and group depart West Yellowstone for Idaho Falls Mr. Hoeffel departs West Yellowstone for Bozeman (Box lunch en route)
10:00	Mr. Holt and others depart Old Faithful for West Yellowstone
1:00	Mr. Rahall and others depart Idaho Falls for DC
2:00	Mr. Hoeffel departs Bozeman for Philadephia

Gipprich, Mel

Full Name:	Steven Bosak
Last Name:	Bosak
First Name:	Steven
Job Title:	Director Motorized Use Program
Department:	National Programs
Business:	454-3398
E-mail:	SBOSAK@NPCA.ORG

Mel

National Parks Conservation Association
The Wilderness Society – Greater Yellowstone Coalition

Presidents' Weekend Trip to Yellowstone National Park
February 14-17, 2003

Contact: Steve Bosak, National Parks Conservation Association
Office, 202/454-3398; Cell, 202/997-0875

Confirmed Guests (8):
Rep. Rush Holt and Dr. Margaret (Annie) Lancefield
Rep. Nick Rahall II and Nick Rahall III
Kristy Crooks (Rep. Shays' office)
Eric Gordon (Rep. Holt's office)
Lisa Moore (Sen. Reid's office)
Christy Plummer (Sen. Chaffee's office)

Hosts (7):
Steve Bosak and Craig Obey – National Parks Conservation Association
Kristen Brengel, Betsy Buffington, Chris Mehl – The Wilderness Society
Jon Catton, Hope Sieck, Michael Scott – Greater Yellowstone Coalition

Draft Agenda[1]

Friday, February 14

3:15 PM	Rep. Rahall and staffers arrive Idaho Falls, ID airport (Craig, Steve, Kristen drive group)
4:06	Rep. Holt and wife arrive Bozeman, MT airport (Hope pick-up)
5:30 – 6:30	West Yellowstone: Guests check-in to Stagecoach Inn
7:00	Welcome Dinner/ Reception at Uncle's Laurie's Riverside Grill with West Yellowstone business owners, NPS staff and select NPCA/TWS board members

[1] We may make some minor changes to our activity schedule prior to our departure to Yellowstone, but the flight and lodging information is final. There is some flexibility in the agenda to accommodate the needs of the tour group and to allow for potential weather delays.

1) Old Faithful Snow Lodge 344-344-73
2) Ste... Ann 801-842-2882

Old Faithful Snow Lodge 307-344-7311

Saturday, February 15

7:00-7:45 AM	Breakfast at Stagecoach Inn
8:00	Depart Stagecoach Inn for Alpen Guide office; load snowcoaches
8:20	Depart Alpen Guide office in snowcoaches
8:30	Arrive at West Entrance Gate; Observe snowmobiles
9:30-10:00	Depart West Entrance for Old Faithful on snowcoach tour
12:00 PM	Box lunch en route to Old Faithful
3:00	Arrive Old Faithful Snowlodge; check-in guests
5:00	Full moon walk with wildlife photographer Tom Murphy
6:00/6:15	Dinner at Old Faithful Snow Lodge
8:00	Evening Program: speakers, slide show Spend night at Old Faithful Snow Lodge

---

Sunday, February 16

7:00 AM	Tour of Geyser Basin with Tom Murphy
9:30	Breakfast at Old Faithful
12 PM	Box lunch
1:00-5:00	Ski/Snowshoe Tours to Upper Geyser Basin or Lone Star Geyser
6:00/6:15	Dinner at Old Faithful Snow Lodge
8:00	Evening Program Spend night at Old Faithful Snow Lodge

Monday, February 17

7:00 AM	Guests with Idaho Falls flights depart Old Faithful for West Yellowstone
9:30	Idaho Falls group departs West Yellowstone (Box lunch en route)
10:00	Later group departs Old Faithful for West Yellowstone
1:00 PM	Flights depart Idaho Falls (Box lunch or lunch stop en route)

Mel

Gipprich, Mel

From: Janelle Chambers [jchambers@wecotravel.com]

Sent: Thursday, January 30, 2003 11:00 AM

To: Gipprich, Mel

Cc: 'sbosak@npca.org'; 'vhodge@npca.org'; 'asingh@npca.org'

Subject: Itinerary to BZN - Hoeffel - Feb 14th - e-tkts - non-ref

WECO-TRAVEL LLC / SAFE HARBORS TRAVEL
2400 BOSTON STREET SUITE ONE
BALTIMORE MD 21224
410 964-3883

SALES PERSON:DNIJC ITINERARY/INVOICE NO. ITIN DATE:JAN 30 2003
CUSTOMER NBR:15022 RECORD LOCATOR:XM46G8 PAGE:01

TO:MR JOHN TERRY
NATIONAL PARKS CONSERVATION
1300 19TH STREET N.W. SUITE 300
WASHINGTON DC 20036

FOR:HOEFFEL/JOSEPH
HOEFFEL/FRANCESCA

14 FEB 03 - FRIDAY
AIR NORTHWST AIR 679 COACH CLASS
LV: PHILADELPHIA 800A EQP:DC-9 JET
3:10
AR: MPLS/ST PAUL 1010A NONSTOP
ARRIVAL TERMINAL-L
SEAT-17E17F
NORTHWEST ELECTRONIC CONFIRMATION NUMBER - 3BR2M3
ACCOUNT 3055-140

AIR NORTHWST AIR 1271 COACH CLASS
LV: MPLS/ST PAUL 1127A EQP:AIRBUS A320 JET
2:32
AR: BOZEMAN 1259P NONSTOP
ADVANCED SEATING LIMIT REACHED - FURTHER SEATING AT CHECK-IN

17 FEB 03 - MONDAY
AIR NORTHWST AIR 1272 COACH CLASS
LV: BOZEMAN 200P EQP:AIRBUS A320 JET
2.17
AR: MPLS/ST PAUL 517P NONSTOP
ARRIVAL TERMINAL-L
ADVANCED SEATING LIMIT REACHED - FURTHER SEATING AT CHECK-IN

CHECK IN 2 HOURS PRIOR TO DEPARTURE FOR DOMESTIC FLIGHTS.
VALID PHOTO ID IS REQUIRED.
CHECK IN FOR INTERNATIONAL FLIGHTS IS 3 HOURS PRIOR TO DEPARTURE.
PLEASE RECONFIRM FLIGHTS 72 HOURS PRIOR TO DEPARTURE.
A VALID PASSPORT IS REQUIRED FOR INTERNATIONAL TRAVEL.
EXPIRATION MUST BE 6 MOS. BEYOND ARRIVAL DATE.

WECO-TRAVEL LLC / SAFE HARBORS TRAVEL
2400 BOSTON STREET SUITE ONE
BALTIMORE MD 21224
410 964-3833

SALES PERSON:DNIJC ITINERARY/INVOICE NO. ITIN DATE:JAN 30 2003
CUSTOMER NBR:15022 RECORD LOCATOR:XM46G8 PAGE:02

TO:MR JOHN TERRY
NATIONAL PARKS CONSERVATION
1300 19TH STREET N.W. SUITE 300
WASHINGTON DC 20036

FOR:HOEFFEL/JOSEPH
HOEFFEL/FRANCESCA

17 FEB 03 - MONDAY
AIR NORTHWST AIR 1542 COACH CLASS
LV: MPLS/ST PAUL 707P EQP:AIRBUS A319 JET
2:34
AR: PHILADELPHIA 1041P NONSTOP
ARRIVAL TERMINAL-E
SEAT-15E15F

14 AUG 03 - THURSDAY
TOUR BOZEMAN
AIRLINE TICKET 926.00-
AIRLINE TICKET 926.00-

FOR AFTER HOURS EMERGENCIES ONLY
CALL 1 866 283-4765
YOUR EXECUTIVE CODE IS A6J
THE AIRLINES HAVE REDEFINED NON-REFUNDABLE TICKET
TO MEAN IF THIS TICKET IS UNUSED IT HAS NO VALUE AND
MAY NOT BE REUSED UNDER ANY CIRCUMSTANCES EVER
THIS FARE REQUIRES 14 DAYS ADVANCE TICKETING
CHANGES MAY BE SUBJECT TO A HIGHER AIRFARE
THANK YOU FOR CALLING WECO-TRAVEL USA LLC...JANELLE

****

UNUSED TICKETS MUST BE RETURNED TO WECO-TRAVEL FOR REFUND OR FUTURE USE.
*THERE WILL BE A $21.00 HANDLING CHARGE ON ALL REFUNDABLE TICKETS.
****

TICKET NUMBER/S:
HOEFFEL/JOSEPH 7239636670
HOEFFEL/FRANCESCA 7239636671

CHECK IN 2 HOURS PRIOR TO DEPARTURE FOR DOMESTIC FLIGHTS.
VALID PHOTO ID IS REQUIRED.
CHECK IN FOR INTERNATIONAL FLIGHTS IS 3 HOURS PRIOR TO DEPARTURE.
PLEASE RECONFIRM FLIGHTS 72 HOURS PRIOR TO DEPARTURE.
A VALID PASSPORT IS REQUIRED FOR INTERNATIONAL TRAVEL.
EXPIRATION MUST BE 6 MOS. BEYOND ARRIVAL DATE.

WECO-TRAVEL LLC / SAFE HARBORS TRAVEL

01/30/2003

2400 BOSTON STREET SUITE ONE
BALTIMORE MD 21224
410 964-3883

SALES PERSON:DNJC ITINERARY/INVOICE NO. ITIN DATE:JAN 30 2003
CUSTOMER NBR:15022 RECORD LOCATOR:XM46G8 PAGE:03

TO:MR JOHN TERRY
NATIONAL PARKS CONSERVATION
1300 19TH STREET N.W. SUITE 300
WASHINGTON DC 20036

FOR:HOEFFEL/JOSEPH
HOEFFEL/FRANCESCA

CHECK IN 2 HOURS PRIOR TO DEPARTURE FOR DOMESTIC FLIGHTS.
VALID PHOTO ID IS REQUIRED.
CHECK IN FOR INTERNATIONAL FLIGHTS IS 3 HOURS PRIOR TO DEPARTURE.
PLEASE RECONFIRM FLIGHTS 72 HOURS PRIOR TO DEPARTURE.
A VALID PASSPORT IS REQUIRED FOR INTERNATIONAL TRAVEL.
EXPIRATION MUST BE 6 MOS. BEYOND ARRIVAL DATE.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2003

FORM A
For use by Members, officers, and employees

HAND DELIVERED

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(Office Use Only)

Peter Hoekstra
(Full Name)

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Holland MI 49423
(Mailing Address)

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Filer Status	[X] Member of the U.S. House of Representatives	State: MI District: 85	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $285 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $285 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Pete Hoekstra	May 21, 2004

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 2003	$2,000
	XYZ Magazine	Article	Aug. 13, 2003	$500
None				

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1,001 - $15,000; C $15,001 - $50,000; D $50,001 - $100,000; E $100,001 - $250,000; F $250,001 - $500,000; G $500,001 - $1,000,000; H $1,000,001 - $5,000,000; I $5,000,001 - $25,000,000; J $25,000,001 - $50,000,000; K Over $50,000,000; L	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; BUSINESS; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $201 - $1,000; III $1,001 - $2,500; IV $2,501 - $5,000; V $5,001 - $15,000; VI $15,001 - $50,000; VII $50,001 - $100,000; VIII $100,001 - $1,000,000; IX $1,000,001 - $5,000,000; X Over $5,000,000; XI	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock	F	DIVIDENDS X		P
	Simon & Schuster	Indefinite	Other Type of Income: Royalties		
	1st Bank of Paducah, KY accounts		INTEREST X	VIII X	
	Personal Accounts				
	Moccatawa Bank	C X	INTEREST X	II X	
	Federal Credit Union	C X	INTEREST X		
	Herman Miller Corp. Stock	D X		III X	Donated
	Federal Thrift Savings	F X	DIVIDENDS X; INTEREST X	I X	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

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SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B [illegible]	C $1,001 – $15,000	D [illegible]	E $50,001 – $100,000	F [illegible]	G $250,001 – $500,000	H [illegible]	I $1,000,001 – $5,000,000	J [illegible]	K $25,000,001 – $50,000,000	L [illegible]	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	EXCEPTED TRUST	[illegible]	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II [illegible]	III $201 – $1,000	IV [illegible]	V $2,501 – $5,000	VI [illegible]	VII $15,001 – $50,000	VIII [illegible]	IX $100,001 – $1,000,000	X [illegible]	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Gentex Corp.					X								X			X										X				S
	Huntington Bank			X										X			X					X									
	Irwin Financial			X										X			X				X										
	APA Optics			X										X			X				X										
	Br. Stearns				X									X			X					X									
	Compaq Computer			X										X			X				X										
	Growth Fund America				X									X			X					X									S
	New Economy Fund				X									X			X					X									
	Schwab Corp.			X										X			X				X										
	Urstadt Biddle			X										X			X				X										
	Washington Mutual Insur.				X									X			X						X								
	FT 422 Tech Part.			X										X			X					X									
	Chesapeake Energy Corp			X										X			X							X							P/S
	Ivanhoe Energy			X										X			X								X						P/S
	Hewlitt Packard			X										X			X					X									S
	Sirius Sat.			X										X			X				X										P
	Clarion			X										X			X				X										
	Microsoft				X									X			X			X											P
	Money Market			X												X						X									
	Union Planters			X										X			X					X									

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	Type of Transaction: SALE	Type of Transaction: EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: A $1,001–$15,000	B	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10–12–03			x								
	Gentex		X		7-18-03			X								
	Gentex		X		8-13-03			X								
	Gentex		X		8-14-03			X								
	Hewlitt Packard		X		5-20-03	X										
	Schwab		X		5-20-03	X										
	Ivanhoe Energy	X			6-30-03	X										
	Ivanhoe Energy		X		9-16-03	X										
	Ivanhoe Energy	Gifted			11-5-03	X										
	Sirius Satellite	X			11-5-03	X										
	Capital World Growth/Amer.		X		4-7-03	X										
	Chesapeake Energy Corp	X			5-8-03	X										
	Chesapeake Energy Corp		X		5-30-03	X										
	Clarion	X			8-8-03	X										
	Microsoft	X			10-22-03			X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Macatawa Bank-Holland, MI	Equity line of credit		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $285 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $114 or less need not be added towards the $285 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$290
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $285 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–11	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	2 Days
Precision Metalforming Assoc.	Oct 24, 25	Grand Rapids-Orlando-GR	Y	Y	N	N
International Foundation	Dec 9-14	DC-Tel Aviv-Amman-Grand Rapids	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Compass Arts

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
None		

Use additional sheets if more space is required.

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